

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029736

Entity Name: NATURAL PHARMACY RX, INC.

FILED
Mar 27, 2006
Secretary of State

Current Principal Place of Business:

697 NORTH SEMORAN BOULEVARD
SUITE B
ORLANDO, FL 32807 US

New Principal Place of Business:

Current Mailing Address:

697 NORTH SEMORAN BOULEVARD
SUITE B
ORLANDO, FL 32807 US

New Mailing Address:

FEI Number: 20-0752406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENEZA, JERRY T
697 NORTH SEMORAN BOULEVARD, SUITE B
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

ENEZA, DAVID
697 NORTH SEMORAN BOULEVARD, SUITE B
ORLANDO, FL 32807 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID ENEZA

03/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ENEZA, JERRY
Address: 12957 MALLORY CIRCLE #305
City-St-Zip: ORLANDO, FL 32828 US

Title: S () Delete
Name: ENEZA, DAVID
Address: 5591 BURLWOOD DR.
City-St-Zip: ORLANDO, FL 32810

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ENESSA, TITUS DR.
Address: 5622 ELIZABETH ROSE SQ
City-St-Zip: ORLANDO, FL 32810 US

Title: VP (X) Change () Addition
Name: ENEZA, DAVID
Address: 5591 BURLWOOD DR.
City-St-Zip: ORLANDO, FL 32810 US

Title: T () Change (X) Addition
Name: ENESSA, TITA
Address: 5622 ELIZABETH ROSE SQ
City-St-Zip: ORLANDO, FL 32810 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID ENEZA

VP

03/27/2006

Electronic Signature of Signing Officer or Director

Date