2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097910

Entity Name: G & H PHARMACY INC

OLDSMAR, FL 34677

City-St-Zip:

FILED Feb 03, 2005 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:			
	URE DRIVE R, FL 34677			STREET NOR PARK, FL 337			
Current Mailing Address:			New Mailir	g Address:			
	URE DRIVE R, FL 34677						
FEI Number:	20-1345961	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
	TAL GROVE B	DUNTING SERVICES, INC LVD					
	named entity s e of Florida.	submits this statement for the p	ourpose of changing it	s registered of	fice or registered agent, or both,	i	
SIGNATUR	RE:						
	Electron	ic Signature of Registered Age	ent		Date		
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DIR () MKPARU, KATH 411 VENTURE I OLDSMAR, FL	DRIVE	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address:	DIR () EZINE-MKPARU 411 VENTURE I		Title: Name: Address:	DIR (X) EZIKE-MKPARU 411 VENTURE D	*		

OLDSMAR, FL 34677

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATHERINE MKPARU DIR 02/03/2005