

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 06, 2011
Secretary of State

Entity Name: PHARMACY MANAGEMENT SOLUTIONS, INC.

Current Principal Place of Business:

1195 GASPARILLA DRIVE N.E
ST. PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

1195 GASPARILLA DRIVE N.E
ST. PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 20-1502633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, MUKESH MR
1195 GASPARILLA DRIVE N.E
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SHAH, MUKESH
Address: 1195 GASPARILLA DRIVE N.E
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: VP
Name: SHAH, MUKESH
Address: 1195 GASPARILLA DRIVE N.E
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: T
Name: SHAH, MUKESH
Address: 1195 GASPARILLA DRIVE N.E
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: S
Name: SHAH, SUKHNINDER
Address: 1195 GASPARILLA DRIVE N.E
City-St-Zip: ST. PETERSBURG, FL 33702 US

I hereby 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 all other like empowered.

SIGNATURE: MUKESH SHAH

P

01/06/2011

Electronic Signature of Signing Officer or Director

Date