## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000089776

MIAMI, FL 33155

City-St-Zip:

Entity Name: FIGUEROA PHARMACY, INC.

FILED Feb 14, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 14449 COUNTRY WALK DRIVE 1102 SW 129TH AVENUE MIAMI, FL 33184 MIAMI, FL 33186 **Current Mailing Address: New Mailing Address:** 1102 SW 129TH AVENUE 14449 COUNTRY WALK DRIVE MIAMI, FL 33184 MIAMI, FL 33186 FEI Number: 20-3050238 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FIGUEROA, HARRY 1102 SW 129TH AVENUE MIAMI, FL 33184 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition FIGUEROA, HARRY Name: Name: 1102 SW 129TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33184 City-St-Zip: Title: VD Title: () Change () Addition () Delete FIGUEROA. ANTONIO E Name: Name: 3102 SW 2ND STREET Address: Address:

City-St-Zip:

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: HARRY FIGUEROA PD 02/14/2006