

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140038

FILED
Apr 27, 2011
Secretary of State

Entity Name: SUB URBAN APOTHECARIES, CORP.

Current Principal Place of Business:

5580 NE 4 COURT
#3
MIAMI, FL 33137 US

New Principal Place of Business:

5580 NE 4TH CT
STE 3
MIAMI, FL 331372695 US

Current Mailing Address:

5580 NE 4 COURT
#3
MIAMI, FL 33137 US

New Mailing Address:

5580 NE 4TH CT
STE 3
MIAMI, FL 331372695 US

FEI Number: 20-3638782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BERMUDEZ, JESSICA PRES
5580 NE 4 COURT
#3
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

SCHLEGEL CONSULTING SERVICE INC
5 NE 107TH ST
MIAMI SHORES, FL 331617029 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: STEVE SCHLEGEL

04/27/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: JESSICA, BERMUDEZ A
Address: 8975 SW 75TH ST
City-St-Zip: MIAMI, FL 331733438 US

Title: VP
Name: BERMUDEZ, JESSICA A
Address: 8975 SW 75TH ST
City-St-Zip: MIAMI, FL 331733438 US

Title: TRES
Name: BERMUDEZ, JESSICA A
Address: 8975 SW 75TH ST
City-St-Zip: MIAMI, FL 331733438 US

Title: SEC
Name: BERMUDEZ, JESSICA A
Address: 8975 SW 75TH ST
City-St-Zip: MIAMI, FL 331733438 US

Title: DIR
Name: BERMUDEZ, JESSICA A
Address: 8975 SW 75TH ST
City-St-Zip: MIAMI, FL 331733438 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: JESSICA A. BERMUDEZ

PRES

04/27/2011

Electronic Signature of Signing Officer or Director

Date