## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000055560

Entity Name: MEGA PHARMACY DISCOUNT, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3939 NW 7 STREET 9801 NW S. RIVER DR. SUITE 3929-3931 MIAMI, FL 33178 MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 127480 440 SW 133 CT. HIALEAH, FL 330121624 MIAMI, FL 33184

FEI Number: 20-4718051 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:

OQUENDO, HECTOR 3939 NW 7 STREET SUITE 3929-3931 MIAMI, FL 33126 US OQUENDO, HECTOR 9801 NW S. RIVER DR. MIAMI, FL 33178 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: 04/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 OQUENDO, HECTOR
 Name:
 OQUENDO, HECTOR

 Address:
 3939 NW 7 STREET #3929-3931
 Address:
 9801 NW S. RIVER DR.

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify 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: HECTOR OQUENDO D 04/27/2007