

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000098991

Entity Name: ALL STAR PHARMACIES, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

4969 US HIGHWAY 98 NORTH
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

2267 MALACHITE DRIVE
LAKELAND, FL 33810

New Mailing Address:

PO BOX 2969
LAKELAND, FL 338062969

FEI Number: 20-5406408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCKOWN, DUANE R PRES
Address: 2267 MALACHITE DR
City-St-Zip: LAKELAND, FL 33810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCKOWN, DUANE R PRES
Address: 6744 CRESCENT WOODS CIR
City-St-Zip: LAKELAND, FL 33813

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: DUANE MCKOWN

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date