2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 24, 2008
Secretary of State

DOCUMENT# P06000135887

Entity Name: MAJE PHARMACY CORP.

Current Principal Place of Business:

12 NW 69 AVE.
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

12 NW 69 AVE.
MIAMI, FL 33126

New Mailing Address:

FEI Number: 84-1720273 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, JESUS
12 N.W. 69 AVE.
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

FERNANDEZ, IRAN
12 N.W. 69 AVE.
MIAMI, FL 33126 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: IRAN FERNANDEZ 09/24/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HERNANDEZ, JESUS
Address: 12 NW 69 AVE.
City-St-Zip: MIAMI, FL 33126

Title: VP (X) Delete
Name: PEREZ, BARBARA
Address: 12 NW 69 AVE.
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: FERNANDEZ, IRAN
Address: 12 NW 69 AVE.
City-St-Zip: MIAMI, FL 33126

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: IRAN FERNANDEZ CEO 09/24/2008
Electronic Signature of Signing Officer or Director Date