

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000029270

FILED
May 21, 2010
Secretary of State

Entity Name: MD OMEGA PHARMACY INC.

Current Principal Place of Business:

4915 S DIXIE HWY
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

4915 S DIXIE HWY
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 20-8592480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, MARIA B
1783 PIERCE DRIVE
LAKE WORTH, FL 33460 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: DIAZ, MARIA B
Address: 1783 PIERCE DRIVE
City-St-Zip: LAKE WORTH, FL 33460

Title: T
Name: CASTRO, ROSA
Address: 10599 SW 6TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S
Name: MORALES, JOSE F
Address: 10599 SW 6TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

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: MARIA B. DIAZ

PRES

05/21/2010

Electronic Signature of Signing Officer or Director

Date