

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000046620

Entity Name: HOLIDAY PHARMACY INC.

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

2160 DUCK SLOUGH BLDG 3, STE 102  
TRINITY, FL 34655 US

## New Principal Place of Business:

## Current Mailing Address:

2160 DUCK SLOUGH BLDG 3, STE 102  
TRINITY, FL 34655 US

## New Mailing Address:

FEI Number: 20-8880260

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, RAJIV  
16120 IVY LAKE DRIVE  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

PATEL, RAJIV  
2160 DUCK SLOUGH BLVD  
SUITE 102  
TRINITY, FL 34655 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PATEL, RAJIV  
Address: 16120 IVY LAKE DRIVE  
City-St-Zip: ODESSA, FL 33556 US

Title: VP ( ) Delete  
Name: PRASHANT, PATEL  
Address: 11611 RENAISSANCE VIEW COURT  
City-St-Zip: TAMPA, FL 33626 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PATEL, RAJIV  
Address: 2160 DUCK SLOUGH BLVD #102  
City-St-Zip: TRINITY, FL 34655 US

Title: VP (X) Change ( ) Addition  
Name: PRASHANT, PATEL  
Address: 2160 DUCK SLOUGH BLVD #102  
City-St-Zip: TRINITY, FL 34655 US

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: PRASHANT PATEL

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date