

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000092921

FILED
Apr 27, 2009
Secretary of State

Entity Name: PHARMACY DOCTORS ENTERPRISES INC.

Current Principal Place of Business:

3800 COLLINS AVENUE
SUITE 1303
MIAMI BEACH, FL 33140 US

Current Mailing Address:

PO BOX 402131
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

205 E HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

205 E HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 US

FEI Number: 26-0739310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARAN, VERONICA
3800 COLLINS AVENUE
SUITE #1303
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

TARAN, VERONICA
3000 S OCEAN DR
SUITE #508
HOLLYWOOD, FL 33019 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:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TARAN, VERONICA
Address: 3800 COLLINS AVENUE, SUITE #1303
City-St-Zip: MIAMI BEACH, FL 33140

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TARAN, VERONICA
Address: 3000 S OCEAN DR
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP () Change (X) Addition
Name: ROGATSKIN, GREGORY
Address: 3000 S OCEAN DR # 508
City-St-Zip: HOLLYWOOD, FL 33019

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: TARAN

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date