

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096116

Entity Name: RX CARE PHARMACY SERVICES, INC

FILED
Sep 16, 2008
Secretary of State

Current Principal Place of Business:

3590 NW 54TH STREET
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

3590 NW 54TH STREET
SUITE 6
FT. LAUDERDALE, FL 33309

Current Mailing Address:

3590 NW 54TH STREET
FT. LAUDERDALE, FL 33309

New Mailing Address:

3590 NW 54TH STREET
SUITE 6
FT. LAUDERDALE, FL 33309

FEI Number: 26-0846484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUKRITSKY, HELEN
1001 CRYSTAL WAY UNIT O
DELRAY BEACH, FL 33444 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 () Delete
Name: BUKRITSKY, HELEN
Address: 1001 CRYSTAL WAY UNIT O
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP () Delete
Name: DUBROVIN, VLADIMIR
Address: 672 GRAY CIRCLE
City-St-Zip: SOUTHAMPTON, PA 18966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: VLADIMIR DUBROVIN

VP

09/16/2008

Electronic Signature of Signing Officer or Director

Date