2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000120063

Entity Name: PRIDE PHARMACY, INC.

FILED Feb 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2734 E. OAKLAND OARK BLVD, SUITE 101 2701 EAST OAKLAND PARK BLVD FORT LAUDERDALE, FL 33406

FORT LAUDERDALE, FL 33306

Current Mailing Address: New Mailing Address:

2734 E. OAKLAND OARK BLVD, SUITE 101 2701 EAST OAKLAND PARK BLVD FORT LAUDERDALE, FL 33406

FORT LAUDERDALE, FL 33306 US

FEI Number: 71-1042992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

REILLY, WILLIAM J 5447 NW 42ND AVE BOCA RATON, FL 33496

2805 EAST OAKLAND PARK BLVD. US 403 FORT LAUDERDALE, FL 33306 US

NELSON, BOB

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: BOB NELSON 02/19/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition NELSON, BOB NELSON, BOB Name: Name:

2734 E. OAKLAND OARK BLVD, SUITE 101 2805 EAST OAKLAND PARK BLVD., SUITE 403 Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33406 US City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title: Title: () Delete (X) Change () Addition

MOSKOVITZ, DAVID Name: Name: MOSKOVITZ, DAVID

2734 E. OAKLAND OARK BLVD, SUITE 101 2701 E. OAKLAND OARK BLVD, SUITE 'B' Address: Address: FORT LAUDERDALE, FL 33406 US FORT LAUDERDALE, FL 33406 US City-St-Zip: 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: BOB NELSON **PRES** 02/19/2008