

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000072511

Entity Name: FRIENDLY PHARMACY, INC

**FILED**  
**Jan 16, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1623 SOUTH ANDREWS AVE  
FORT LAUDERDALE, FL 33316 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

1550 NE MIAMI GARDENS DR  
SUITE 305  
NORTH MIAMI BEACH, FL 33179

## **New Mailing Address:**

1623 SOUTH ANDREWS AVE  
FORT LAUDERDALE, FL 33316 US

FEI Number: 90-0514786

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ROSEN, GENE S ESQ.  
1550 NE MIAMI GARDENS DR  
SUITE 305  
NORTH MIAMI BEACH, FL 33179 US

## **Name and Address of New Registered Agent:**

LUBUS, ARTHUR S JR  
10295 N.W. 18TH DRIVE  
PLANTATION, FL 33322 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: ARTHUR S, LUBUS JR

01/16/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PR/D  
Name: LUBUS, ARTHUR S  
Address: 10295 N.W. 18TH DRIVE  
City-St-Zip: PLANTATION, FL 33322 US

Title: VSD  
Name: MCELANEY, CHARLES  
Address: 1623 SOUTH ANDREWS AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33316

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: ARTHUR S. LUBUS JR

PR/D

01/16/2011

Electronic Signature of Signing Officer or Director

Date