## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000023652

Entity Name: PANAMA DRUGS, INC

FILED Apr 25, 2011 Secretary of State

| Current Principal Place of Business:   |                              | New Principal Place o                    | New Principal Place of Business:           |  |
|--|------------------------------|--|--|--|
| 3127 E HIGHWAY 98<br>PANAMA CITY, 32401  |                              | 3127 E HIGHWAY 98<br>PANAMA CITY, FL 324 | 3127 E HIGHWAY 98<br>PANAMA CITY, FL 32401 |  |
| Current Mailing Address:   |                              | New Mailing Address:                     | New Mailing Address:                       |  |
| 2303 W 15TH ST<br>D<br>PANAMA CITY, FL 32401   |                              |  |  |  |
| FEI Number: 27-2231043   | FEI Number Applied For ( )   | FEI Number Not Applicable ( )            | Certificate of Status Desired ( )          |  |
| Name and Address of Current Registered Agent:  |                              | Name and Address of                      | Name and Address of New Registered Agent:  |  |
| MOHAMED, ISMAIL M<br>2918 HARRISON AVE<br>F  |                              |  |  |  |
| PANAMA CITY, FL 32405 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:   |                              |  |  |  |
| Electronic   | Signature of Registered Agen | nt                                       | Date                                       |  |

## **OFFICERS AND DIRECTORS:**

Title:

Name: MOHAMED, ISMAIL M Address: 2918 HARRISON AVE City-St-Zip: PANAMA CITY, FL 32401

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: ISMAIL MOHAMED P 04/25/2011