

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000077385

Entity Name: PHARMA ONE INC.

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4060 NW 37 AVE  
HIALEAH, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

4060 NW 37 AVE  
HIALEAH, FL 33142

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

BLANCO, CESAR  
8404 SW 102 PL  
MIAMI, FL 33173 US

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

MANUEL J, CHAVEZ  
4060 NW 37 AVE  
MIAMI, FL 33142 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: MANUEL J. CHAVEZ

Electronic Signature of Registered Agent

03/31/2011

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: .MANUEL J, CHAVEZ  
Address: 4060 NW 37 AVE  
City-St-Zip: MIAMI, FL 33142

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: MANUEL J. CHAVEZ

Electronic Signature of Signing Officer or Director

P

03/31/2011

Date