

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000024347

FILED
Apr 27, 2012
Secretary of State

Entity Name: THRIFT PHARMACY INC.

Current Principal Place of Business:

1350 RIVER REACH DRIVE # 209
FORT LAUDERDALE, FL 33315 US

New Principal Place of Business:

94 E MCNAB RD
POMPANO BEACH, FL 33060 US

Current Mailing Address:

1350 RIVER REACH DRIVE # 209
FORT LAUDERDALE, FL 33315 US

New Mailing Address:

94 E MCNAB RD
POMPANO BEACH, FL 33060 US

FEI Number: 45-0599520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELTOKHY, OLA
1350 RIVER REACH DRIVE # 209
FORT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

ELTOKHY, OLA
94 E MCNAB RD
POMPANO BEACH, FL 33060 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: OLA ELTOKHY

04/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ELTOKHY, OLA
Address: 1350 RIVER REACH DRIVE # 209
City-St-Zip: FORT LAUDERDALE, FL 33315 US

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: OLA ELTOKHY

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date