

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000040532

Entity Name: CBA PHARMACY INC.

**FILED**  
**Jan 20, 2012**  
**Secretary of State**

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

13016 SANCTUARY COVE DRIVE  
STE 103  
TAMPA, FL 33637

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

7208 N. STERLING AVENUE  
STE B  
TAMPA, FL 33614

## **Current Mailing Address:**

13016 SANCTUARY COVE DRIVE  
STE 103  
TAMPA, FL 33637

## **New Mailing Address:**

7208 N. STERLING AVENUE  
STE B  
TAMPA, FL 33614

FEI Number: 45-2043266

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DHAMA, KARTHIK B  
13016 SANCTUARY COVE DRIVE  
UNIT 103  
TAMPA, FL 33637 US

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

DHAMA, KARTHIK B  
7208 N. STERLING AVENUE  
UNIT B  
TAMPA, FL 33614 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:

01/20/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: DHAMA, KARTHIK B  
Address: 7208 N. STERLING AVENUE STE B  
City-St-Zip: TAMPA, FL 33614

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: KARTHIK DHAMA

PR

01/20/2012

Electronic Signature of Signing Officer or Director

Date