

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000043131

FILED
Apr 19, 2012
Secretary of State

Entity Name: SOUTH FLORIDA MEDICAL STORE INC

Current Principal Place of Business:

332 W BOYNTON BEACH BLVD
STE 4
BOYNTON BEACH, FL 33435 US

Current Mailing Address:

332 W BOYNTON BEACH BLVD
STE 4
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

4201 WESTGATE AVE
STE B-14
WEST PALM BEACH, FL 33409 US

New Mailing Address:

4201 WESTGATE AVE
STE B-14
WEST PALM BEACH, FL 33409 US

FEI Number: 37-1636359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, TIM V
332 W BOYNTON BEACH BLVD
STE 4
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

LEWIS, TIMOTHY V
4201 WESTGATE AVE
STE B-14
WEST PALM BEACH, FL 33409 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: TIMOTHY LEWIS

04/19/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LEWIS, TIMOTHY V
Address: 4201 WESTAGE AVE
City-St-Zip: WEST PALM BEACH, FL 33409

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: TIM LEWIS

P

04/19/2012

Electronic Signature of Signing Officer or Director

Date