

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000105542

Entity Name: WELLS PHARMA, INC.

FILED
Apr 11, 2012
Secretary of State

Current Principal Place of Business:

11101 S CROWN WAY
SUITE 5
WELLINGTON, FL 33414

New Principal Place of Business:

11120 S. CROWN WAY
SUITE #11
WELLINGTON, FL 33414

Current Mailing Address:

11101 S CROWN WAY
SUITE 5
WELLINGTON, FL 33414

New Mailing Address:

11120 S. CROWN WAY
SUITE #11
WELLINGTON, FL 33414

FEI Number: 45-4040310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

SHAPIRO, COLLEEN STACY
11101 S. CROWN WAY
SUITE #5
WELLINGTON, FL 33414 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: COLLEEN STACY SHAPIRO

04/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SHAPIRO, COLLEEN S
Address: 11101 S. CROWN WAY, SUITE 5
City-St-Zip: WELLINGTON, FL 33414

Title: VS
Name: GARYVEY, DOUGLAS
Address: 11101 S CROWN WAY, SUITE #5
City-St-Zip: WELLINGTON, FL 33414

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: COLLEEN STACY SHAPIRO

PD

04/11/2012

Electronic Signature of Signing Officer or Director

Date