

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000051089

FILED
Apr 19, 2012
Secretary of State

Entity Name: PRESCRIPTION CARE PHARMACY, INC.

Current Principal Place of Business:

5890 STERLING RD.
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

5820 STIRLING ROAD
HOLLYWOOD, FL 33021 US

Current Mailing Address:

5890 STERLING RD.
HOLLYWOOD, FL 33021 US

New Mailing Address:

5820 STIRLING ROAD
HOLLYWOOD, FL 33021 US

FEI Number: 65-0427534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCOLINO, FERNANDO
5890 STERLING RD.
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

MARCOLINO, FERNANDO
5820 STIRLING ROAD
HOLLYWOOD, FL 33021 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:

04/19/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVST
Name: MARCOLINO, FERNANDO
Address: 5820 STIRLING ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Title: D
Name: MARCOLINO, FERNANDO
Address: 5820 STIRLING ROAD
City-St-Zip: HOLLYWOOD, FL 33021

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: FERNANDO MARCOLINO

PRES

04/19/2012

Electronic Signature of Signing Officer or Director

Date