## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400042020 (5) SUPER PHARMACY NETWORK, INC.

## **FILED** May 11 1998 8:00am Secretary of State



1055 ST. CHARLES AVE. 1055		Mailing Address 1055 ST. CHARLES AV	55 ST. CHARLES AVE.				
NEW ORLEANS LA 70130-3	999	NEW ORLEANS LA 701	30-3999		DO NOT WRITE	E IN THI <b>S S</b> PACE	=
					3. Date Incorporated or Qualified 05/31/1994	2 117 117 07 1101	
2. Principal Place of Busin		2a. Mailing Address			4. FEI Number		Applied For
	3165	26 P.O. Bo	<u> 10 x 316</u>	5	59-3252055		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	<del></del>	·	5. Certificate of Status Desired	1 1 7 7	.75 Additional ee Required
City & State  23 Horrisby Zio.	s. PA	City & State  Horrisb	urg, PA	<u></u>	Election Campaign Financing     Trust Fund Contribution		5.00 May Be dded to Fees
L	Country			y	8. This corporation owes or has pa		
[24]	the Address of Current	120	30		Personal Property Tax due June		
		Hegistered Agent	81	Name	10. Name and Address of New Ro	egistered Agent	
CT CORPORAT		`	۱°'	Name			
	ration systems inc	<i>)</i> .	82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)	
1200 S. PINE I Plantation F			83	<del> </del>			***
POMINIONE	L 33324						
			B4	City		FL 85	Zip Code
11. Pursuant to the provision	ons of Sections 607 0502	and 607 1508. Florida Stat	tutes, the abov	e-named corp	oration submits this statement for the		ging its registered
	int or both in the State o	Ullorida, Such change wa	e authorizad h	v the corporati	ion's board of directors. I hereby acce	pt the appointme	ent as registered
office or registered age agent. I am familiar wit	i, and accept the obligati	ons of, Section 607,0505,	Florida Statute	S.	·		
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