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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Feb 07 1997 8:00am

Secretary of State

Sandra B. Hortinan

Secretary of State

DIVISION OF CORPORATIONS

| | WISE PHARMACY INC | Mailing Address | | | | | |
|---|--|--|--|--|------------------------------------|---|---|
| 8336 B NORTH ARMENIA AVENU TAMPA FL 33604 US | | 8338 B NORTH ARMENIA AVENUE (1854) A RECENTRAL TAMPA FL 33604-2734 | | | | | |
| | | | | 3. Date Incorporated or Qualified 11/07/1994 | 3a. Date of 05/01/ | | eport |
| Principal P | lace of Business | 2a. Mailing Address | · · · · · · · · · · · · · · · · · · · | 4. FEI Number | | | plied For |
| | | 26 | | 59-3275872 | | | t Applicabl |
| Suite, Apt | #, elc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | □ \$ | 8.75 A Fee Re | Additional |
| City & Stat | | City & State | | & Election Compaign Financing | | | |
| | · | 28 | | Election Campaign Financing Trust Fund Contribution | | PO.UU Added t | May Be |
| Zip | Country | Zip | Country | 8. This corporation has liability fo | | | |
|] | 25 | 29 | 30 | | Yes N | | , |
| | 9. Name and Address of Curre | nt Registered Agent | | 10. Name and Address of New R | legistered Ager | nt | |
| | TEL, NEENA | | 81 Name P | ATEL PRETTI | | | |
| | 3 WESTMORELAND DR. | | 82 Street Add | Iress (P.O. Box Number is Not Accept EALTHWISE PHE | (b) Mac | J | |
| TAN | #PA FL 33618 | | 83 40 H | CHLIHOIDE PHE | RIGITU | 1 | |
| | | | 83? | 38 N. ARMENIA | BAVE | | |
| | | | 84 City | \~ PQ | F1 81 | 333 | Code |
| 1 Pursuant | | | | | | | יייר או |
| a. ruisuani | to the provisions of Sections 607.050 | 02 and 607.1508, Florida Statu | ites, the above-named cor | poration submits this statement for the | purpose of cha | | |
| office or i | to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with and accept the oblice. | 02 and 607.1508, Florida Statu e of Florida. Such change was nations of Section 607.0505, F | ites, the above-named corporal authorized by the corporal forida Statutes. | poration submits this statement for the ation's board of directors. I hereby acc | purpose of cha ept the appointr | | |
| agent. La | to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with and accept the oblic | 02 and 607.1508, Florida Statu e of Florida. Such change was gations of, Section 607.0505, Fl | ites, the above-named corporal authorized by the corporal forida Statutes. | poration submits this statement for the strongs board of directors. I hereby acc | purpose of cha ept the appointr | | |
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