## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P95000070530

Entity Name: PLAZA PHARMACY INC.

FILED Sep 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

1347 LYONS ROAD COCONUT CREEK, FL 33063

Current Mailing Address: New Mailing Address:

1347 LYONS ROAD 4399 NW 124TH AVENUE COCONUT CREEK, FL 33063 CORAL SPRINGS, FL 33065

FEI Number: 65-0609088 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SALPETER, JACK
346 N.W. 87 TERR
CORAL SPRINGS, FL 33071 US

FERLISE, PERRY
4399 NW 124TH AVENUE
CORAL SPRINGS, FL 33065 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: PERRY FERLISE 09/23/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P,D (X) Change ( ) Addition

 Name:
 SALPETER, JACK
 Name:
 ROTWEIN, STEVEN

 Address:
 346 NORTHWEST 87TH TERRACE
 Address:
 4399 NW 124TH AVENUE

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: VP ( ) Delete Title: S,T (X) Change ( ) Addition

 Name:
 SALPETER, MARC J
 Name:
 FERLISE, PERRY

 Address:
 7742 NW 20TH DRIVE
 Address:
 4399 NW 124TH AVENUE

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 FERLISE, PERRY

 Address:
 Address:
 4399 NW 124TH AVENUE

 City-St-Zip:
 City-St-Zip:
 CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVEN ROTWEIN P 09/23/2009