

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072671 (7)

1. Corporation Name
RX ONE, INC.

FILED

97 AUG 22 PM 1:20

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
601 SOUTH LAKE DESTINY DRIVE
SUITE 250
MAITLAND FL 32751

Mailing Address
601 SOUTH LAKE DESTINY DRIVE
SUITE 250
MAITLAND FL 32751-7262

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

25. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

1016 W 9th Ave
Attn: Tax Dept
King of Prussia, PA
19406
USA

3. Date Incorporated or Qualified
09/18/1995

3a. Date of Last Report
02/27/1996

4. FEI Number
59-3358932

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes No

9. Name and Address of Current Registered Agent

CT Corporation System
1800 South Pine Island Road
Plantation FL 33344

10. Name and Address of New Registered Agent

81 Name
82
83
84 City
85 Zip Code

9000002276779-3
09/25/97-01178-009
****550.00 ****550.00
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DST	BYRD, B. C	001 SOUTH LAKE DESTINY DRIVE, SUITE 250	MAITLAND FL 32751	<input type="checkbox"/>
DP	MAYVILLE, WILLIAM E	001 SOUTH LAKE DESTINY DRIVE, SUITE 250	MAITLAND FL 32751	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
VP	Brad Behr			<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP / D	Arthur Locicento			<input type="checkbox"/>	<input checked="" type="checkbox"/>
Secretary	Marie Martino			<input type="checkbox"/>	<input checked="" type="checkbox"/>
All Located @				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE

[Signature]

5-3-97 610-992-7408

CR2E034 (9/96)