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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000103835 (0)

RAPID RX, INC.

NAME

STREET ADDRESS

Dringing Diag	a of Business	Mailing Address			
Principal Place of Business		-	• •••		
250 CATALONIA AVE. STE 501 CORAL GABLES FL 33134		250 CATALONIA AVE. STE CORAL GABLES FL 33134		DO NOT WRIT	E IN THIS SPACE
				3. Date Incorporated or Qualified	
				12/27/1996	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
• •	2TH STREET, NORTH	26 110 12TH ST	REET NORTH	65÷0714789	Not Applicable
Suite, Apt #, etc SUITE B-103		Suite, Apt. #, etc. 27 SUITE B-103		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
	NGHAM, ALABAMA	BIRMINGHAM,		Trust Fund Contribution	Added to Fees
Zip	Country	7ip	Country	8. This corporation owes or has p	<u> </u>
₂₄ 35203	₂₅ USA		30 USA	Personal Property Tax due Jun	
	9. Name and Address of Curr	rent Hegistered Agent	81 Name	10. Name and Address of New R	egistered Agent
	DRIGUEZ, JOSE A		I Valrie		
	PRICKELL AVE. STE 950		82 Street Addre	ess (P.O. Box Number is Not Accepta	ible)
MIA	AMI FL 33131		83		
	•		84 City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508 Florida Statute	s the above-named corp	oration submits this statement for the ion's board of directors. I hereby acce	purpose of changing its registered
SIGNATURE	Signature typest or protect control typest net	Thomas her	Registered Agent signature require		4/13/98
TITLE	D	DELETE	11 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	SURIS, ROBERT J JR.		1.2 NAME		
STREET ADDRESS	250 CATALONIA AVE. STE	501	1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL 33134	•••	1.4 CITY · ST - ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME .	BELLIN, MARSHAL		2.2 NAME		
STREET ADDRESS	250 CATALONIA AVE. STE	501	2.3 STREET ADDRESS		
CITY-ST-ZIP	OORAL GABLES FL 33134		2. 4 CITY - ST - ZIP		
TITLE	D	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	BELLIN, DAVID		3.2 NAME		
STREET ADDRESS	110 12TH STREET I	NORTH #B-103	3.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 3	35203	3 4. CITY - ST - ZIP		
TITLE	OFFICER - VP OPER	RATIONS DELETE	4.1 TO LE		Change Addition
NAME	SHOEMAKER, CLAIRI		4. 2 NAME		
STREET ADDRESS	110 12TH STREET 1		4.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL	35203	4.4 CITY - ST - ZIP 5.1 TITLE	***	Change Addition
TITLE	PRESIDENT	El nerere			FT CHANGE FT WOOMING
NAME OVERET LERENCE	FIELDS, DEBRA		5.2 NAME		
STREET ADDRESS	110 12TH STREET N	NORTH #B-103	5.3 STREET ANDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 3	15203	5.4 C(1Y - ST - Z(P		Channe Addition

14. I 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 receiver 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 attachment with an address.

6.2 NAME

CALATURE ALL A A A A A A A A A A A CHORNAR

F/22/00

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FILED

Jun 01 1998 8:00am

Secretary of State