2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003323

Entity Name: PHARMEK DRUGS, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8150 SW 8TH STREET 8150 SW 8TH STREET

203 203

MIAMI, FL 331444265 US MIAMI, FL 331444273 US

Current Mailing Address: New Mailing Address:

8150 SW 8TH STREET 8150 SW 8TH STREET

MIAMI, FL 331444265 US MIAMI, FL 331444273 US

FEI Number: 65-0781377 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:

JIMENEZ, JUAN A
8150 SW 8TH STREET
203

JIMENEZ, JUAN A
8150 SW 8TH STREET
203

203

MIAMI, FL 331444265 US MIAMI, FL 331444273 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: 04/27/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete

Name: JIMENEZ, JUAN A Address: 8150 SW 8TH STREET, STE # 203

City-St-Zip: MIAMI, FL 331444265 US

City-3t-2ip. WilAWII, 1 E 331444203 00

Title: STD () Delete Name: MAINEGRA, ANA M

Address: 8150 SW 8TH STREET, STE. 203

City-St-Zip: MIAMI, FL 331444265 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

Name: JIMENEZ, JUAN A

Address: 8150 SW 8TH STREET, STE # 203

City-St-Zip: MIAMI, FL 331444273 US

Title: STD (X) Change () Addition

Name: MAINEGRA, ANA M

Address: 8150 SW 8TH STREET, STE. 203 City-St-Zip: MIAMI, FL 331444273 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JUAN A JIMENEZ PD 04/27/2006