

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000064634

Entity Name: PALM AVENUE PHARMACY, INC.

FILED
Feb 09, 2007
Secretary of State

Current Principal Place of Business:

400 PALM AVENUE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

400 PALM AVENUE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 65-0769614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECHEVARRIA, VICKY
133 LENAPE DRIVE
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

ECHEVARRIA, VICKY
400 PALM AVENUE
HIALEAH, FL 33010 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: VICKY ECHEVARRIA

02/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: ECHEVARRIA, VICKY
Address: 133 LENAPE DRIVE
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: ECHEVARRIA, VICKY
Address: 400 PALM AVENUE
City-St-Zip: HIALEAH, FL 33010

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: VICKY ECHEVARRIA

PDS

02/09/2007

Electronic Signature of Signing Officer or Director

Date