

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000068517 (6)

1. Corporation Name
FIRST PHARMACY CORP.



Principal Place of Business

1489 W. PALMETTO PARK ROAD
SUITE 485
BOCA RATON FL 33486

Mailing Address

1489 W. PALMETTO PARK ROAD
SUITE 485
BOCA RATON FL 33486

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/06/1997

4. FEI Number

65-0777094

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 2259 W Hillsboro Blvd.

Suite, Apt #, etc.

22

City & State

23 Deerfield Beach, Florida

Zip

24 33442

Country

25 USA

2a. Mailing Address

26 2259 W Hillsboro Blvd.

Suite, Apt #, etc.

27

City & State

28 Deerfield Beach, Florida

Zip

29 33442

Country

30 USA

9. Name and Address of Current Registered Agent

CANTOR, SAMUEL J
1489 W. PALMETTO PARK ROAD
SUITE 485
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0002 and 607.1500, 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, which 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 obligation of, Section 607.0501, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent, if applicable

(NOTE: Registered Agent Signature required when reinstating)

4/30/98

12. OFFICERS AND DIRECTORS

TITLE D
NAME PARKER, DAVID L
STREET ADDRESS 1489 W. PALMETTO PARK ROAD, SUITE 485
CITY-ST-ZIP BOCA RATON FL 33486

☒ DELETE

TITLE D
NAME CANTOR, SAMUEL J
STREET ADDRESS 1489 W. PALMETTO PARK ROAD, SUITE 485
CITY-ST-ZIP BOCA RATON FL 33486

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Steve Rose
1.3 STREET ADDRESS 2717 W. Cypress Creek Rd.
1.4 CITY-ST-ZIP Ft. Lauderdale, Florida 33309

☐ Change ☒ Addition

2.1 TITLE D
2.2 NAME Steve Kelley
2.3 STREET ADDRESS 2717 W. Cypress Creek Rd.
2.4 CITY-ST-ZIP Ft. Lauderdale, Florida 33309

☐ Change ☒ Addition

3.1 TITLE D
3.2 NAME Jennifer Halikman
3.3 STREET ADDRESS 2259 W Hillsboro Blvd.
3.4 CITY-ST-ZIP Deerfield Beach, FL. 33442

☐ Change ☒ Addition

4.1 TITLE D
4.2 NAME Dan O'Gorman
4.3 STREET ADDRESS 2717 W Cypress Creek Rd.
4.4 CITY-ST-ZIP Ft. Lauderdale, FL. 33309

☐ Change ☒ Addition

5.1 TITLE D
5.2 NAME Samuel J. Cantor
5.3 STREET ADDRESS 1489 W Palmetto Park Rd, Suite 485
5.4 CITY-ST-ZIP Boca Raton, FL. 33486

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ 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 initial 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.

CR2E034 (10/97)