2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000087705

Entity Name: LITTLE RIVER PHARMACY, INC

FILED Jul 09, 2009 Secretary of State

		VERTIFICATION.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
203 NE 821 MIAMI, FL					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
203 NE 821 MIAMI, FL					
FEI Number:	65-0795671	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
203 NE 82 MIAMI, FL	33136 US			d efficiency and a south as both	
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () DOMINGUE, CA 203 NE 82ND S MIAMI, FL 3313	Т.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () TRANQUILLE, Y 203 NE 82ND S MIAMI, FL 3313	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: YTRANQUILLE VD 07/09/2009