2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

$\overline{}$	\sim	\sim i	16 /		NT	11
11	(1	1	31\/	ı III - I	NI I	71
			11V		u I	77

P98000013316

YAMATO VILLAGE PHARMACY, INC.

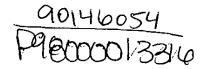


FILED Jul 24, 2003 8:00 am Secretary of State 07-24-2003 90110 047 ***150.00

Principal Place of Business 9101 LAKERIDGE BLVD. STE 22 BOCA RATON FL 33496		Mailing Address 9101 LAKERIDGE BLVD. STE 22 BOCA RATON FL 33496									
Principal Place of Business 3. Mailing Addres)	
9595 Colling AVE Suited Apt. # etc.			9599 Colling AVE Suite Apr. # etc.				CHECK HERE IF MAKING CHANGES				
Sur & State ide . FL			Gity & State Hide	, /=	7	4.	FEI Number 65-081018	36	<u> </u>	oplied For ot Applicable	
73/	94	Country 4	33194	Country	A		Certificate of Status Desired		88.75 Ad ee Require		
6. Name and Address of Current Registered Agent											
PORTMAN, SCOTT B 9101 LAKERIDGE BLVD, STE 22 BOCA RATON FL 33496					Street A	dress (P.O.	Boy Number is Not Acceptable	^{hle)} # 50	9		
				-	CityGulfaide FL Zucade 64						
8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SiGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinsfating)											
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State							9. Election Campaign F Trust Fund Contribut	ion.	Added	May Be	
10.	DPS	OFFICERS AND D	Delete	11.		A	DDITIONS/CHANGES TO OF		DIRECTOR Change	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	PORTMAN 9101 LAKE	, scott B Eridge Blvd, ste 22 Ton Fl 33496	. Delete	NAME	ADDRESS (- ZIP	9595	Collins Ave		-	Addition (
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Celete	TITLE I NAME STREET (ADDRESS -ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	NAME	ADDRESS -ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		☐ Delete	TITLE NAME STREET A	ADDRESS - Zip			,	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET A					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET A	ļ			1	Change	☐ Addition	
of the corp	on this report paration or the	or supplemental report is to receiver or trustee emoow	rue and accurate and that r	ny signature as required	e shall ha	ive the same.	119.07(3)(i), Florida Statutes legal effect as if made under ida Statutes; and that my nar	roath∵that Lan	n an officer.	or director	

Attachment

YAMATO VILLAGE PHARMACY INC 9595 COLLINS AVENUE # 509 SURFSIDE, FLORIDA 33154



July 11, 2003

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

RE: YAMATO VILLAGE PHARMACY INC DOCUMENT # P98000013316 UBR 2003

Gentlemen:

Upon receipt of the second 2003 Uniform Business Report my secretary called your office to let you know that although we had put in a change of address with the post office in Boca Raton, Florida our original 2003 Uniform Business Report was never delivered to our current address. We were told by your office to include this information in a letter and file the attached form with a check made payable to the Florida Department of State in the amount of \$150.00.

Attached please find our completed 2003 UBR along with our check number 205 in the amount of \$ 150.00. That you for your understanding.

Sincerely,

Scott B. Portman

President of Yamato Village Pharmacy Inc