

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020103

FILED  
Jan 14, 2004  
Secretary of State

Entity Name: DADE PHARMACY DISCOUNT INC.

## Current Principal Place of Business:

3013 EAST 4TH AVENUE  
HIALEAH, FL 33013

## New Principal Place of Business:

## Current Mailing Address:

3013 EAST 4TH AVENUE  
HIALEAH, FL 33013

## New Mailing Address:

FEI Number: 65-0817339

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DIEGUEZ, ANTHONY P.A.  
1840 WEST 49TH STREET, STE. 411  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

DIEGUEZ, ANTHONY P.A.  
7950 NW 155TH STREET  
207  
MIAMI LAKES, FL 33016 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:

01/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVP ( ) Delete  
Name: FERNANDEZ, LUIS  
Address: 3013 EAST 4TH AVENUE  
City-St-Zip: HIALEAH, FL 33013

Title: ST ( ) Delete  
Name: FERNANDEZ, EDDA IVONNE  
Address: 3013 EAST FOURTH AVE.  
City-St-Zip: HIALEAH, FL 33013

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FERNANDEZ, LUIS A PRES.  
Address: 3013 EAST 4TH AVENUE  
City-St-Zip: HIALEAH, FL 33013

Title: VPST (X) Change ( ) Addition  
Name: FERNANDEZ, EDDA IVONNE VP SECT  
Address: 3013 EAST FOURTH AVE.  
City-St-Zip: HIALEAH, FL 33013

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS A. FERNANDEZ

PRES

01/14/2004

Electronic Signature of Signing Officer or Director

Date