2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000070428

Entity Name: NAVARRO DISCOUNT PHARMACIES NO. 10, INC.

FILED Feb 27, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5959 N.W. 37TH AVENUE 15000 SW 72 STREET MIAMI, FL 33412 MIAMI, FL 33193 **Current Mailing Address: New Mailing Address:** 5959 N.W. 37TH AVENUE MIAMI, FL 33412 FEI Number: 65-0870089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NAVARRO, MARCEL L 5959 NW 37TH AVE MIAMI, FL 33142 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition NAVARRO, JOSE F NAVARRO, JOSE F Name: Name: 5959 N.W. 37TH AVENUE 5959 N.W. 37TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33412 City-St-Zip: MIAMI, FL 33412

 Title:
 D
 () Delete

 Name:
 NAVARRO, LUIS G

 Address:
 5959 N.W. 37TH AVENUE

 City-St-Zip:
 MIAMI, FL 33412

 Title:
 D
 () Delete

 Name:
 NAVARRO, MARCEL

 Address:
 5959 N.W. 37TH AVENUE

 City-St-Zip:
 MIAMI, FL 33412

 Title:
 D
 () Delete

 Name:
 NAVARRO, GABRIEL

 Address:
 5959 N.W. 37TH AVENUE

 City-St-Zip:
 MIAMI, FL 33412

 $\begin{array}{lll} \mbox{Title:} & \mbox{DVP} & (\mbox{X}) \mbox{ Change () Addition} \\ \mbox{Name:} & \mbox{NAVARRO, LUIS G} \end{array}$

Address: 5959 N.W. 37TH AVENUE
City-St-Zip: MIAMI, FL 33412

Title: DVPS (X) Change () Addition

 Name:
 NAVARRO, MARCEL L

 Address:
 5959 N.W. 37TH AVENUE

 City-St-Zip:
 MIAMI, FL 33412

Title: DVP (X) Change () Addition

Name: NAVARRO, GABRIEL L Address: 5959 N.W. 37TH AVENUE City-St-Zip: MIAMI, FL 33412

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: MARCEL L. NAVARRO S 02/27/2003