

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000023999

Entity Name: PDI PHARMACY SERVICES, INC.

FILED
Jun 11, 2008
Secretary of State

Current Principal Place of Business:

6405 CONGRESS AVE
STE 140
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6405 CONGRESS AVE
STE 140
BOCA RATON, FL 33487

New Mailing Address:

C/O BOCA PHARMACY
22191 POWERLINE RD 22C
BOCA RATON, FL 33433

FEI Number: 65-0902543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRABER, NORBERT
6405 CONGRESS AVE, #140
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

GRABER, NORBERT
22191 POWERLINE RD
22C
BOCA RATON, FL 33433 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: NORBERT H GRABER

06/11/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRABER, NORBERT
Address: 7138 MARIANA COURT
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: ABADY, SALVADOR
Address: 22262 HOLLYHOCK TRAIL
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NORBERT H GRABER

D

06/11/2008

Electronic Signature of Signing Officer or Director

Date