2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 06, 2004 8:00 am Secretary of State **DOCUMENT # P99000044492** 1. Entity Name RX USA MARKETING, INC. 04-06-2004 90020 016 ***150.00 Mailing Address Principal Place of Business 13811 ONEIDA DRIVE 13811 ONEIDA DRIVE DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446 Principal Place of Business 3. Mailing Address STREET STREET 116 SPRUCE Suite, Apt. #, etc. Suite, Apt, #, etc. 03302004 Chg-P CR2E034 (10/03) BOYNTON BEACH 4. FEI Number Applied For City & State 65-0921671 Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BREINDEL BLEINDEL, MICHAEL 13811 ONEIDA DRIVE 131 DELRAY BEACH, FL 33446 8. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agen SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ጎዐ. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PTC Change MICHAEL BREINDEL 116 SPRUCE STREET Delete TITLE ☐ Addition BREINDEL, MICHAEL AME NAME STREET ADDRESS 13811 ONEIDA DRIVE STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33446 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP me ☐ Delete ☐ Change TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition | STREET ADDRESS STREET ADDRESS CITY-ST-762 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Addition ПΠЕ ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS COTY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 mpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

MICHAEL

FILED