FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

CORAL REEF PHARMACY AND DISCOUNT STORE, INC.

FILED Feb 12 1998 8:00am Secretary of State



									<u> </u>	
Principal Place of Business Mailing Address								ı idanlaya ida tittə bistə tahla okut asatı atanı dıanı dıanı alatı alatı alatı alatı		
13796 SW 152ND ST 13796 SW 152ND ST										
MIAMI FL 33177			MIAM! FL	MIAMI FL 33177					DO NOT WRITE IN THIS SPACE	
									3. Date Incorporated or Qualified	
									02/20/1991	
2. Principal Place of Business 2e. Mailing Address									4. FEI Number Applied For	
<u> </u>				h						
Suite, Apt. #, etc.			26 Suito A	Suite, Apt. #, etc.					CO 75	
			<u>├</u> ─┐	27					5. Certificate of Status Desired Fee Required	
City & State				City & State						
23			├ ┐ ′	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country				Zip Country				-	7,000 (31 000	
24 25		29 30				8. This corporation owes or has paid the currept year intangible Personal Property Tax due June 30. Yes No				
24		Address of Curren		gent	30	Τ_			10. Name and Address of New Registered Agent	
LAA						81	Name	 8		
	ARQUEZ, JOSE									
782 NW LEJEUNE ROAD							82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 548				}						
MIZ	AMI FL 33126					83				
						84	City		FL 85 Zip Code	
44 Directors	to the pendainne	of Costions CO7 OLO	0 and 607 1500	Elorido Statut	os the s			d corpo		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	SIGNATURE Signature, typed or populed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
						13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	DP	OFFICENS AN	DINICIONS	DELETE	1.1 11	TIE		Ţ	CORRECTION Change Addition	
NAME		ARMANDO J.			1.2 N			ŀ		
		WETS END TO					4000000	حما	35 Taylor and Dand	
STREET ADDRESS	1 11 2 2 2 2 7							941	75 Journey's End Road	
CITY-ST-ZIP	CORAL GA	DLEO FL		DELETE	1.4 C 2.1 Ti	ITY-S	T-ZIP	+	☐ Change ☐ Addition	
TITLE	•	arav .		DELETE				1	C Politicus	
NAME	LOPEZ, ED				22 N			1		
STREET ADDRESS		106TH AVE CIR					ADDRESS	[;]		
CITY-ST-ZIP	MIAMI FL			T Atiete			T-ZIP	+ -		
TITLE	D			DELETE "	3.1 TI				ame 🛮 🖾 Change 🗀 Addition	
NAME	DIAZ, JOSE				3.2 N				Same	
STREET ADDRESS 9120-9W-1013T-AVE		•				ADDRESS		301 SW 103 Street		
CITY-ST-ZIP	MIAMI FL				~~~		T-ZIP	↓ Mi	liami, Florida	
TITLE				DELÉTE	4.1 14				Change Addition	
NAME					4.21	AME				
STREET ADDRESS					4.3 S	TREET	ADDRESS	;		
CITY-ST-ZIP						ITY-S	T-ZIP			
TITLE]			DELETE	5.1 TI	TLE			☐ Change ☐ Addition	
NAME					5.2 N	AME				
STREET ADDRESS					5.3 S	TREET	ADDRESS	;		
CITY-ST-ZIP					5.4 C	ITY-S	T-ZIP			
TITLE				DELETE	6.1 T	ITLE			☐ Change ☐ Addition	
NAME					6.2 N	AME				
STREET ADDRESS					6.3 S	TREET	ADDRESS	;		
CITY-ST-ZIP						ffY-S				

14. I hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of husbe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: