

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90578 001 ***150.00

DOCUMENT # S32960

1. Entity Name
CORAL REEF PHARMACY AND DISCOUNT STORE, INC.



Principal Place of Business
**13796 SW 152ND ST
MIAMI, FL 33177**

Mailing Address
**782 NW LEJEUNE ROAD
548
MIAMI, FL 33126**

04041600



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04062004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
65-0245060

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARQUEZ, JOSE M.
782 NW LEJEUNE ROAD
SUITE 548
MIAMI, FL 33126**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**Law Offices of
Marquez & Marcelo-Robaina, P.A.
LeJeune Center, Suite 548
782 N.W. LeJeune Road
Miami, Florida 33126 FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jose Marquez

04/15/2004

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DS** ☐ Delete
NAME **DIAZ, JOSE F.**
STREET ADDRESS **9301 SW 103 STREET**
CITY-ST-ZIP **MIAMI, FL**

TITLE **D** ☐ Delete
NAME **GUERRA, ALBERTO**
STREET ADDRESS **241 CAPE FLORIDA DRIVE**
CITY-ST-ZIP **KEY BISCAYNE, FL 33149**

TITLE **D** ☐ Delete
NAME **GUERRA, ARANDO J**
STREET ADDRESS **9475 JOURNEY'S END RD.**
CITY-ST-ZIP **CORAL GABLES, FL 33156**

TITLE **P** ☐ Delete
NAME **CUERVO, LENCIO (LEONCIO)**
STREET ADDRESS **13092 NW 11 COURT**
CITY-ST-ZIP **SUNRISE, FL 33323**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **COB** ☒ Change ☐ Addition
NAME **GUERRA, Armando J.**
STREET ADDRESS **9475 Journey's End Road**
CITY-ST-ZIP **Coral Gables, FL 33156**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other those empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/2004 (305) 447-1160

Date

Daytime Phone #