SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996 **DOCUMENT #**1. Corporation Name

FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

DIVISION OF CORPORATIONS

(8)

DRUG MART STORE 103 INC.

	e of Business	100, 1140,	Mari	Com Adda									
3572 U.S. 27 SEBRING FL	Mailing Address 3572 U.S. 27 S SEBRING FL 33870							1 16441 E11600 NNG 11805 11881 E1116	FB11 8:411 21E11	OFBIL DIBIL	ı BIĞIN GIĞIK 1891		
									3.	Date Incorporated or Qualified	1		st Report
2. Principal F	20 14-1						1	04/27/1992		/01/19	T		
21	2a. Mailing Address										Applied For		
Suite, Apt.	26	Suite, Apt. #, etc.					59-3138462 Not Applicable \$8,75 Additional						
22	F1	27					5.	Certificate of Status Desired			D Additional e Required		
City & Stat	City & State							Election Campaign Financing			'		
23	28	J1					J 0.	Trust Fund Contribution			00 May Be ded to Fees		
Zıp	[0	Ouritry		Zip		Coun	itry		8.	This corporation has liability for	r intangible		
24	25		29			30				Florida Statutes	Yes] No	0.0.001
	9. Name and A	ddress of Curre	nt Registe	red Agen	t				10.	Name and Address of New F	legistered A	Agent	
GE	TTEL, GERALD V	V.				1	81	Name					
168 POE DR SE						T	82	Street Add	ress (F	O. Box Number is Not Accept	able)		
	NTER HAVEN FL	33884					_						
1						1	83						
						ļ.	84	City				85	Zip Code
44-6				7222		l	l			77 'A 77 A 77 A 77 A 77 A 77 A 77 A 77	FL.		
office or r agent La	to the provisions of registered agent, o im familiar with and	Sections 607.050 both, in the State accept the ob	Floride	,1508, Flo Such et a lection 60	nda Statute Inge was a 7.0505, Flo	es, the abo luthorized b orida Statut	ive by t es.	-named corp the corporati	oration ion's b	submits this statement for the oard of directors. Thereby acce	purpose of o pt the appoi	changing ntment a	g its registered as registered
SIGNATURE	Signature type Lorpent		of and the it is	G	eralo	d W. IE Begisteraa	G Age	ettel ntsgnature requi	, Di		June		
12.	T	OFFICERS AN	D DIRECT	ORS		13.				ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECT	TORS IN 12
TITLE	D				DELETE	11 1110	.E					Chan	nge Addition
NAME	Gettel, Ger					1.2 NAN	Æ						
STREET ADDRESS	168 POE DR					13 S I R	EET.	ADDRESS					
CITY-ST-ZIP	WINTER HAV	EN FL			DELETE	14 C(T)		f - 7IP					
THILE NAME				L.J	DELETE	217√1					Ĺ	Chan	ige [] Addition
· ·						2.2 NAA							
STHEET ADDRESS								ADDRESS					
CITY-ST-ZIP TITLE				т.	DELETE	2 4 C/T 3 1 T/TL		3T - ZIP				T "66	. T 3411
NAME					DECEME	31 IIIL					L	Chan	ige Addition (
STREET ADDRESS								ADDRESS					
CITY-ST-7IP						34 CIT							İ
THLE					DELETE	4 1 Till		ot zir			Г	Chan	nge Addition
NAME						4 2 NA					L		.a. [] .m.m.(ii)
STREET ADORESS								ADDRESS					

Crty - S1 - 2IP 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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 of the receiver of trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or Block in changed or the adminishing with an address.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CiTY - ST - ZIP

5.1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

TITLE

Gerald W. Gettel GETATO W. GELTET

DELETE

DELETE

6/7/96

941/385-9500

FILED

Secretary of State

Jun 25 1996 8:00 am

Change Addition

Change Addition