

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 522606

FILED
Apr 30, 2008
Secretary of State

Entity Name: SEDANO'S PHARMACY AND DISCOUNT STORES, INC.

Current Principal Place of Business:

9686 SW CORAL WAY
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9686 SW CORAL WAY
MIAMI, FL 33165

New Mailing Address:

FEI Number: 59-1728771 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARQUEZ & MARCELO ROBAINA, P.A
6303 BLUE LAGOON DRIVE
SUITE 390
MIAMI, FL 331266005 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GUERRA, ARMANDO J
Address: 9475 JOURNEY'S END ROAD
City-St-Zip: CORAL GABLES, FL 33156

Title: DS () Delete
Name: HERRAN, MANUEL A
Address: 8460 SW 5TH STREET
City-St-Zip: MIAMI, FL 33144

Title: DVP () Delete
Name: GUERRA, ALBERTO
Address: 241 CAPE FLORIDA DRIVE
City-St-Zip: KEY BISCAZYNE, FL 33149

Title: VP () Delete
Name: SALGUEIRO, HEBERTO
Address: 1524 SW 66 COURT
City-St-Zip: MIAMI, FL 331445548

Title: DVAS () Delete
Name: DIAZ, JOSE F
Address: 9301 SW 103RD ST
City-St-Zip: MIAMI, FL 331763056

Title: DVP () Delete
Name: GUERRA, MARIA C
Address: 9475 JOURNEY'S END ROAD
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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

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: ARMANDO J. GUERRA

P

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date