

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000000203

Entity Name: VIDA PHARMACY CORP

Current Principal Place of Business:

70 W. 49 ST.
HIALEAH, FL 33012-3710

Current Mailing Address:

70 W. 49 ST.
HIALEAH, FL 33012-3710

FEI Number: 20-8130935

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FERNANDEZ, SILVIA M
330 SW 187 AVE
PEMBROKE PINES, FL 33029 US

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

Officer/Director Detail :

Title P
Name FERNANDEZ, SILVIA M
Address 330 SW 187 AVE
City-State-Zip: PEMBROKE PINES FL 33029

Title VP
Name FERNANDEZ, RAIMUNDO
Address 330 SW 187 AVE
City-State-Zip: PEMBROKE PINES FL 33029

I hereby 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 all other like empowered.

SIGNATURE: RAIMUNDO FERNANDEZ

VP

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date