## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104446

Entity Name: SUNSHINE PHARMACY AND SUPPLIES, INC.

**Current Principal Place of Business:** 

6933 NW 82 AVE MIAMI. FL 33166

**Current Mailing Address:** 

6933 NW 82 AVE MIAMI, FL 33166 US

FEI Number: 26-3770647 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOZAS, ANGEL 6933 NW 82 AVE MIAMI, FL 33166 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: ANGEL MOZAS 01/16/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P, T Title VP

 Name
 MOZAS, ANGEL
 Name
 GOITIA, AMADO A

 Address
 6933 NW 82 AVE
 Address
 6933 NW 82 AVE

 City-State-Zip:
 MIAMI FL 33166
 City-State-Zip:
 MIAMI FL 33166

Title S

Name GOITIA, TANIA M Address 6933 NW 82 AVE City-State-Zip: MIAMI FL 33166

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: TANIA GOITIA

Electronic Signature of Signing Officer/Director Detail

01/16/2017

FILED Jan 16, 2017

**Secretary of State** 

CC5652585861

Date

Date