

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104446

Entity Name: SUNSHINE PHARMACY AND SUPPLIES, INC.

Current Principal Place of Business:

10645 NW 122 ST
MEDLEY, FL 33178

Current Mailing Address:

10645 NW 122 ST
MEDLEY, FL 33178

FEI Number: 26-3770647

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOZAS, ANGEL
10645 NW 122 ST
MEDLEY, FL 33178 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

03/24/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, T
Name MOZAS, ANGEL
Address 10645 NW 122 ST
City-State-Zip: MEDLEY FL 33178

Title VP
Name GOITIA, AMADO A
Address 10645 NW 122 ST
City-State-Zip: MEDLEY FL 33178

Title S
Name GOITIA, TANIA M
Address 10645 NW 122 ST
City-State-Zip: MEDLEY FL 33178

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: ANGEL MOZAS

PT

03/24/2014

Electronic Signature of Signing Officer/Director Detail

Date