2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2015
Secretary of State
CC3408861734

DOCUMENT# P11000071280

Entity Name: BEST CARE PHARMACY INC

Current Principal Place of Business:

2389 CORAL WAY
CORAL GABLES, FL 33145

Current Mailing Address:

2389 CORAL WAY
CORAL GABLES, FL 33145

FEI Number: 45-2946928

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMEED, ABDUL
2389 CORAL WAY
CORAL GABLES, FL 33145 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	PRES
Name	HAMEED, ABDUL
Address	2389 CORAL WAY
City-State-Zip:	CORAL GABLES FL 33145

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: ABDUL HAMEED PRESIDENT 02/24/2015

Electronic Signature of Signing Officer/Director Detail — Date