

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000084818

**Entity Name:** COMFORT PHARMACY 2 CORP

**Current Principal Place of Business:**

12600 SW 120TH STREET  
SUITE 110  
MIAMI, FL 33186

**Current Mailing Address:**

8300 WEST FLAGLER STREET SUITE 210  
MIAMI, FL 33144

**FEI Number:** 47-5297423

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MOLINA, SURELY  
5862 WEST FLAGLER STREET  
MIAMI, FL 33144 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	Title	VP
Name	PORTILLA, GERARDO	Name	PORTILLA, GINA V
Address	8300 WEST FLAGLER STREET SUITE 210	Address	8300 WEST FLAGLER STREET SUITE 210
City-State-Zip:	MIAMI FL 33144	City-State-Zip:	MIAMI FL 33144

*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:** GINA PORTILLA

**MANAGER**

**04/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date