

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000033777

Entity Name: PRICE CHOICE PHARMACY # 1 LLC

Current Principal Place of Business:

247 SW 8TH ST. #207
MIAMI, FL 33130

Current Mailing Address:

247 SW 8TH ST. #207
MIAMI, FL 33130

FEI Number: 45-1143803

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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

Authorized Person(s) Detail :

Title MGRM
Name MOLINA, EMERSON
Address 247 SW 8TH ST.#207
City-State-Zip: MIAMI FL 33130

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EMERSON MOLINA

MGRM

05/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date