

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214538772				
1.) CORPORATION NAME: DRUGSTORE PRODUCTS, INC.		DUE DATE: 5/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: INCorp SERVICES INC 7228 HANOVER GREEN DR MECHANICSVILLE, VA		SCC ID NO: F1897554				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HANOVER COUNTY		5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,500
CLASS	AUTHORIZED					
COMMON	1,500					
4.) STATE OR COUNTRY OF INCORPORATION: NJ						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1861 PREAKNESS CT. CITY/ST/ZIP: WALL, NJ 07719						
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME: GARY ROBBINS TITLE: PRESIDENT ADDRESS: P.O. BOX 110849 CITY/ST/ZIP/CO: NAPLES, FL 34108	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: JOHNNA ROBBINS TITLE: TREASURER ADDRESS: P.O. BOX 110849 CITY/ST/ZIP/CO: NAPLES, FL 34108	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ GARY ROBBINS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GARY ROBBINS, PRESIDENT PRINTED NAME AND CORPORATE TITLE	8/8/2014 DATE				
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.						