

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000032025

**Entity Name:** RX REVERSE DISTRIBUTORS INC.

**Current Principal Place of Business:**

9255 US HIGHWAY 1  
SEBASTIAN, FL 32958

**Current Mailing Address:**

9255 US HIGHWAY 1  
SEBASTIAN, FL 32958

**FEI Number:** 47-0951496

**Certificate of Status Desired:** No

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

CLEMENTE, BRIAN  
9255 US HIGHWAY 1  
SEBASTIAN, FL 32958 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 DIR  
Name CLEMENTE, BRIAN  
Address 9255 US HIGHWAY 1  
City-State-Zip: SEBASTIAN FL 32958

Title DIR  
Name CLEMENTE, ALIX  
Address 9255 US HIGHWAY 1  
City-State-Zip: SEBASTIAN FL 32958

Title V  
Name CLEMENTE, DANIEL  
Address 9255 US HIGHWAY 1  
City-State-Zip: SEBASTIAN FL 32958

Title S  
Name CLEMENTE BOTKE, AMY  
Address 9255 US HIGHWAY 1  
City-State-Zip: SEBASTIAN FL 32958

*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:** BRIAN CLEMENTE

**PRESIDENT**

**01/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date