

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000095277

Entity Name: LAKHANI RX, INC.**Current Principal Place of Business:**4400 N ANDREWS AVE
FT LAUDERDALE, FL 33309**Current Mailing Address:**4400 N ANDREWS AVE
FT LAUDERDALE, FL 33309**FEI Number:** 45-3968054**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSS, GREG
311 SOUTHEAST TENTH CT
FT LAUDERDALE, FL 33316 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
Name	LAKHANI, ANEESH
Address	4400 N ANDREWS AVE
City-State-Zip:	FT LAUDERDALE FL 33309

Title	T
Name	LAKHANI, ASHOK
Address	4400 N ANDREWS AVE
City-State-Zip:	FT LAUDERDALE FL 33309

Title	VP
Name	LAKHANI, MICHELLE
Address	4400 N ANDREWS AVE
City-State-Zip:	FT LAUDERDALE FL 33309

Title	S
Name	LAKHANI, PRATIMA
Address	4400 N ANDREWS AVE
City-State-Zip:	FT LAUDERDALE FL 33309

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: ANEESH LAKHANI**PRESIDENT****02/01/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date