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.

PRESIDENT

SIGNATURE: BRUCE KADOURA

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P12000077323

Entity Name: INTERCONTINENTAL PHARMA INC

Current Principal Place of Business:

7887 BRYAN DAIRY RD SUITE 130 LARGO, FL 33777

Current Mailing Address:

P.O.BOX 66758 ST.PETE BEACH, FL 33736 US

FEI Number: 46-0955447

Name and Address of Current Registered Agent:

KADOURA, BRUCE 7887 BRYAN DAIRY RD SUITE 130 LARGO, FL 33777 US

FILED Apr 22, 2014 Secretary of State CC8166273227

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	COO, CHAIRMAN	Title	DIRECTOR
Name	KADOURA, BRUCE	Name	MUNGARA, PADMANABHARAJU
Address	P.O.BOX 66758	Address	7021 38TH AVE N
City-State-Zip:	ST PETE BEACH FL 33736	City-State-Zip:	ST PETERSBURG FL 33710
Title	DIRECTOR		
Litle Name	DIRECTOR CAMARA, TIDIANE		
Name	CAMARA, TIDIANE		

04/22/2014 Date

Date