

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000200556

**Entity Name:** FLORIDA PHARMA USA LLC

**Current Principal Place of Business:**

211 S 3RD STREET  
LANTANA, FL 33462

**Current Mailing Address:**

211 S 3RD STREET  
LANTANA, FL 33462 US

**FEI Number:** 81-1140288

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
3030 N. ROCKY POINT DR  
STE 105A  
TAMPA, FL 33607 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:** PETER KLEIN

01/10/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name KLEIN, PETER  
Address 211 S 3RD STREET  
City-State-Zip: LANTANA FL 33462

Title AMBR  
Name KOKOSZKA, THOMAS  
Address 135 RICHARD STREET  
City-State-Zip: NEWINGTON CT 06111

Title AMBR  
Name PHILLIPS, JASON ANTHONY  
Address 111 ROSEWOOD  
City-State-Zip: LAKE JACKSON TX 77566

*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:** PETER KLEIN

AMBR

01/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date