

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000200556

Entity Name: FLORIDA PHARMA USA LLC

Current Principal Place of Business:

61 N LAKESHORE DR
HYPOLUXO, FL 33462

Current Mailing Address:

61 N LAKESHORE DR
HYPOLUXO, FL 33462 US

FEI Number: 81-1140288

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH STREET NORTH
SUITE 300
ST.PETERSBURG, FL 33702 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

04/06/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name KLEIN, PETER
Address 61 N LAKESHORE DR
City-State-Zip: HYPOLUXO FL 33462

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

04/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date