2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2016
Secretary of State
CC3318554621

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Entity Name: FLORIDA PHARMA USA LLC

Current Principal Place of Business:

419 N.E 3RD STREET
SUITE A
BOYNTON BEACH, FL 33435

Current Mailing Address:

419 N.E 3RD STREET
SUITE A
BOYNTON BEACH, FL 33435

FEI Number: 81-1140288

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KLEIN, PETER
419 N.E 3RD STREET
SUITE A
BOYNTON BEACH, FL 33435 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

Authorized Person(s) Detail :

Title	AMBR
Name	KLEIN, PETER
Address	419 N.E 3RD STREET SUITE A
City-State-Zip:	BOYNTON BEACH FL 33435

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 03/30/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date