

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000085040

**Entity Name:** INTERNATIONAL PHARMA REF LLC

**Current Principal Place of Business:**

1555 BONAVENTURE BLVD  
SUITE # 1019  
WESTON, FL 33326

**Current Mailing Address:**

1555 BONAVENTURE BLVD  
SUITE # 1019  
WESTON, FL 33326 US

**FEI Number:** 36-4937052

**Certificate of Status Desired:** No

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

PARJUS LAW  
1535 N PARK DR  
STE 104  
WESTON, FL 33326 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 MGR  
Name VICUNA PIMENTEL, RITA V  
Address 1555 BONAVENTURE BLVD SUITE  
#1019  
City-State-Zip: WESTON FL 33326

*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:** RITA VICUNA PIMENTEL

MGR

03/31/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date