

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000002990

**Entity Name:** IMPAX STRATEGIC MARKETING & SELLING, INC.**Current Principal Place of Business:**252 WILTON ROAD  
WESTPORT, CT 06880**Current Mailing Address:**252 WILTON ROAD  
WESTPORT, CT 06880**FEI Number: 06-1129491****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PACIFIC REGISTERED AGENTS, INC.  
5647 110TH AVE NORTH  
ROYAL PALM BEACH, FL 33411 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**Officer/Director Detail :**Title PCTD  
Name MATLOW, DAVID S  
Address 252 WILTON ROAD  
City-State-Zip: WESTPORT CT 06880Title VP  
Name SHONKA, MARK  
Address 252 WILTON ROAD  
City-State-Zip: WESTPORT CT 06880Title D  
Name KOSCH, DANIEL  
Address 252 WILTON ROAD  
City-State-Zip: WESTPORT CT 06880Title S  
Name STRACZEK, JOHANNA  
Address 48 RAILROAD PLACE  
City-State-Zip: WESTPORT CT 06880Title D  
Name MCKANE, DAVID B  
Address 274 RIVERSIDE AVENUE  
City-State-Zip: WESTPORT CT 06880

*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.*

**SIGNATURE: JOHANNA STRACZEK****SECRETARY****02/23/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date