2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003742

Entity Name: IMMUNA CARE CORPORATION

Current Principal Place of Business:

650 SENTRY PARKWAY, STE. ONE

BLUE BELL, PA 19422

Current Mailing Address:

650 SENTRY PARKWAY, STE. ONE BLUE BELL. PA 19422

FEI Number: 23-2521657 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLUG, THOMAS L 13654 NORTH 12TH STREET, STE.3 TAMPA, FL 33613 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 DP Title DVP

Name KLUG, THOMAS L Name MANKIN, GARY

Address 13654 N. 12TH STREET, STE. 3 Address 650 SENTRY PARKWAY, STE. ONE

City-State-Zip: TAMPA FL 33613 City-State-Zip: BLUE BELL PA 19422

Title ST

Name MANKIN, GARY

Address 650 SENTRY PARKWAY, STE. ONE

City-State-Zip: BLUE BELL PA 19422

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: GARY MANKIN

Electronic Signature of Signing Officer/Director Detail

VICE PRESIDENT

02/05/2016

FILED Feb 05, 2016

Secretary of State

CC4438494304

Date