

2015 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F06000004026

Entity Name: CONVERGE BIOTECH, INC.

Current Principal Place of Business:

C/O DIABETES RESEARCH INSTITUTE
1450 NW 10TH AVE.
MIAMI, FL 33136

FILED
Mar 16, 2015
Secretary of State
CC0905661229

Current Mailing Address:

C/O DIABETES RESEARCH INSTITUTE
1450 NW 10TH AVE
MIAMI, FL 33136 US

FEI Number: 20-5007805

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32301 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 PRESIDENT & TREASURER
Name LATTA, PAUL
Address C/O DIABETES RESEARCH INSTITUTE
 1450 NW 10TH AVE.
City-State-Zip: MIAMI FL 33136

Title SECRETARY
Name MILLER, EDWIN L. JR.
Address ONE POST OFFICE SQUARE, 22ND
 FLOOR
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name LATTA, PAUL
Address C/O DIABETES RESEARCH INSTITUTE
 1450 NW 10TH AVE.
City-State-Zip: MAIMI FL 33136

Title DIRECTOR
Name RICORDI, CAMILLO
Address C/O DIABETES RESEARCH INSTITUTE
 1450 NW 10TH AVE.
City-State-Zip: MIAMI FL 33136

Title DIRECTOR
Name COSSETTI, STEFANIA
Address C/O DIABETES RESEARCH INSTITUTE
 1450 NW 10TH AVE.
City-State-Zip: MAIMI FL 33136

Title DIRECTOR
Name INSERRA, BONNIE
Address C/O DIABETES RESEARCH INSTITUTE
 1450 NW 10TH AVE.
City-State-Zip: MIAMI FL 33136

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: PAUL LATTA

PRESIDENT

03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date