

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000001686

**Entity Name:** MOLECULARMD CORP.**Current Principal Place of Business:**2100 PENNBROOK PARKWAY  
NORTH WALES, PA 19454**Current Mailing Address:**2100 PENNBROOK PARKWAY  
NORTH WALES, PA 19454 US**FEI Number:** 20-3829030**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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, DIRECTOR
Name	MISKEL, JAMES
Address	2100 PENNBROOK PARKWAY
City-State-Zip:	NORTH WALES PA 19454

Title	ASST. TREASURER
Name	DUKISSIS, LISA
Address	2100 PENNBROOK PARKWAY
City-State-Zip:	NORTH WALES PA 19454

Title	VP, SECRETARY, TREASURER, DIRECTOR
Name	MCMILLAN, GEORGE
Address	2100 PENNBROOK PARKWAY
City-State-Zip:	NORTH WALES PA 19454

Title	ASST TREASURER
Name	MILLER, BEVERLY
Address	2100 PENNBROOK PARKWAY
City-State-Zip:	NORTH WALES PA 19454

*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:** GEORGE MCMILLAN**TREASURER****04/26/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date