

**2015 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F07000001686

**FILED**  
**Apr 28, 2015**  
**Secretary of State**  
**CC5669698343**

**Entity Name:** MOLECULARMD CORP.

**Current Principal Place of Business:**

505 S. FLAGLER DRIVE, SUITE 1330  
W. PALM BEACH, FL 33401

**Current Mailing Address:**

505 S. FLAGLER DRIVE, SUITE 1330  
W. PALM BEACH, FL 33401 US

**FEI Number:** 20-3829030

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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 CHAIRMAN, DIRECTOR  
Name SNYDER , SHERIDAN G.  
Address 505 S. FLAGLER DRIVE, SUITE 1330  
City-State-Zip: W. PALM BEACH FL 33401

Title PRESIDENT, CEO, TREASURER & DIRECTOR  
Name SNYDER, SHERIDAN D.  
Address 505 S. FLAGLER DRIVE, SUITE 1330  
City-State-Zip: W. PALM BEACH FL 33401

Title VP OF MEDICAL AFFAIRS, DIRECTOR  
Name GALDERISI, CHAD  
Address 505 S. FLAGLER DRIVE, SUITE 1330  
City-State-Zip: W. PALM BEACH FL 33401

Title SECRETARY  
Name CALHOUN, CHERYL  
Address 505 S. FLAGLER DRIVE, SUITE 1330  
City-State-Zip: W. PALM BEACH FL 33401

Title DIRECTOR  
Name RICE, MATT  
Address 505 S. FLAGLER DRIVE, SUITE 1330  
City-State-Zip: W. PALM BEACH FL 33401

Title DIRECTOR  
Name GRAHAM, DREW  
Address 505 S. FLAGLER DRIVE, SUITE 1330  
City-State-Zip: W. PALM BEACH FL 33401

*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:** CALHOUN , CHERYL

**BY:** MONICA GONZALEZ 04/28/2015  
**ATTORNEY IN FACT**

Electronic Signature of Signing Officer/Director Detail

Date