

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004905

FILED
Jan 21, 2019
Secretary of State
1633206931CC

Entity Name: CANTEX PHARMACEUTICALS, INC.

Current Principal Place of Business:

1792 BELL TOWER LANE
SUITE 200
WESTON, FL 33326

Current Mailing Address:

1792 BELL TOWER LANE
SUITE 200
WESTON, FL 33326

FEI Number: 41-2035780

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERTRAND, CLAUDE
1792 BELL TOWER LANE
SUITE 200
WESTON, FL 33326 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
Name MARCUS, STEPHEN G
Address 1792 BELL TOWER LANE
City-State-Zip: WESTON FL 33326

Title D
Name MARCUS, STEPHEN G
Address 1792 BELL TOWER LANE
City-State-Zip: WESTON FL 33326

Title D
Name KROEGER, CHRISTOPHER
Address 1792 BELL TOWER LANE
City-State-Zip: WESTON FL 33326

Title CFO
Name RODRIGUEZ, JUAN
Address 1792 BELL TOWER LANE
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name FLANZRAICH, NEIL
Address 1792 BELL TOWER LANE
 SUITE 200
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name BRADY, TODD
Address 1792 BELL TOWER LANE
 SUITE 200
City-State-Zip: WESTON FL 33326

Title VP FINANCE
Name BERTRAND, CLAUDE
Address 1792 BELL TOWER LANE
 SUITE 200
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name LU, SHAWN
Address 1792 BELL TOWER LANE
 SUITE 200
City-State-Zip: WESTON FL 33326

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: CLAUDE BERTRAND

VP FINANCE

01/21/2019

Electronic Signature of Signing Officer/Director Detail

Date