

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000004823

**Entity Name:** MELANOVUS ONCOLOGY, INC.**Current Principal Place of Business:**2301 N.E. SAVANNAH ROAD #528  
JENSEN BEACH, FL 34958**Current Mailing Address:**2301 N.E. SAVANNAH ROAD #528  
JENSEN BEACH, FL 34958**FEI Number: 45-4987345****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GORDON, PETER  
936 BEAR ISLAND CIRCLE  
SUITE 200  
WEST PALM BEACH, FL 33409 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: PETER GORDON****01/08/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	D/P
Name	LYTLE, THOMAS S
Address	4748 N.W. WINTER OAK CT.
City-State-Zip:	JENSEN BEACH FL 34957

Title	D
Name	CUSHARD, JOHN
Address	1937 LAKE MARSHALL DR.
City-State-Zip:	GIBSONIA PA 15044

Title	D
Name	MAFRICA, RICHARD A
Address	134 VINEYARD CR.
City-State-Zip:	YOUNTVILLE CA 94599

Title	D/O
Name	ROBERTSON, GAVIN P
Address	1071 FAIRDEN DR.
City-State-Zip:	HUMMELSTOWN PA 17036

Title	D
Name	FOREMAN, PHILLIP G
Address	400 GEORGETOWNE COURT
City-State-Zip:	WEXFORD PA 15090

Title	S
Name	GORDON, PETER
Address	936 BEAR ISLAND CR.
City-State-Zip:	WEST PALM BEACH FL 33409

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: PETER GORDON****CORPORATE SECRETAR 01/08/2014**

Electronic Signature of Signing Officer/Director Detail

Date