

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000002536

FILED
Jul 04, 2023
Secretary of State
8973449758CC

Entity Name: ORGANICELL REGENERATIVE MEDICINE, INC.

Current Principal Place of Business:

3300 S. UNIVERSITY DRIVE
SUITE 246
FORT LAUDERDALE, FL 33328

Current Mailing Address:

3300 S. UNIVERSITY DRIVE
SUITE 246
FORT LAUDERDALE, FL 33328 US

FEI Number: 47-4180540

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MITRANI, RYNOR, ADAMSKY & TOLAND PA
301 ARTHUR GODFREY ROAD
PENTHOUSE
MIAMI BEACH, FL 33140 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: ISAAC MITRANI

07/04/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, DIRECTOR
Name LEIDER, HARRY
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title CFO, DIRECTOR
Name BOTHWELL, IAN T.
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title DIRECTOR, CHIEF MEDICAL OFFICER
Name SHAPIRO, GEORGE
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title CHIEF SCIENCE OFFICER
Name GOLUB, HOWARD
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title DIRECTOR
Name GLAUSER, JERRY
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title DIRECTOR
Name STEARN, LEATHERM
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title DIRECTOR
Name BRETZ, CHUCK
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

Title DIRECTOR
Name SINGH, GURVINDER PAL
Address 3300 S. UNIVERSITY DRIVE
SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328

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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: IAN BOTHWELL

CFO, DIRECTOR

07/04/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MITRANI, MARIA
Address 3300 S. UNIVERSITY DRIVE
 SUITE 246
City-State-Zip: FORT LAUDERDALE FL 33328