

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005235

Entity Name: OWP PHARMACEUTICALS, INC.

Current Principal Place of Business:

931 W HAWTHORNE LANE
WEST CHICAGO, IL 60185

Current Mailing Address:

931 W HAWTHORNE LANE
WEST CHICAGO, IL 60185 US

FEI Number: 46-5164973

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS STE 400
FORT MYERS, FL 33907 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 C,P
Name BOYER, SCOTT
Address 450 CRANESBILL DRIVE
City-State-Zip: WEST CHICAGO IL 60185

Title D,S,T
Name DUNCAN, BRUCE
Address 822 FARM DRIVE
City-State-Zip: WEST CHICAGO IL 60185

Title D
Name BOYER, RUTH
Address 450 CRANESBILL DRIVE
City-State-Zip: WEST CHICAGO IL 60185

Title D
Name DUNCAN, JUDY
Address 822 FARM DRIVE
City-State-Zip: WEST CHICAGO IL 60185

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: SCOTT H. BOYER

PRESIDENT

04/13/2017

Electronic Signature of Signing Officer/Director Detail

Date