

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000002660

**Entity Name:** PRPGENICS PHARMACEUTICALS, INC

**Current Principal Place of Business:**

331 TREBLE COVE ROAD B300-2  
N. BILLERICA, MA 01862

**Current Mailing Address:**

331 TREBLE COVE ROAD B300-2  
N. BILLERICA, MA 01862 US

**FEI Number: 13-3379479**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:** LYNELL ALLISON

04/23/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HEINO, MARY ANNE  
Address        311 TREBLE COVE ROAD B300-2  
City-State-Zip: N. BILLERICA MA 01862

Title            SECRETARY  
Name            NIEDZWIECKI, DANIEL M.  
Address        311 TREBLE COVE ROAD B300-2  
City-State-Zip: N. BILLERICA MA 01862

Title            CFO  
Name            MARSHALL, ROBERT J. JR.  
Address        311 TREBLE COVE ROAD B300-2  
City-State-Zip: N. BILLERICA MA 01862

Title            DIRECTOR  
Name            HEINO, MARY ANNE  
Address        311 TREBLE COVE ROAD B300-2  
City-State-Zip: N. BILLERICA MA 01862

Title            DIRECTOR  
Name            NIEDZWIECKI, DANIEL M.  
Address        311 TREBLE COVE ROAD B300-2  
City-State-Zip: N. BILLERICA MA 01862

Title            DIRECTOR  
Name            MARSHALL, ROBERT J.  
Address        311 TREBLE COVE ROAD B300-2  
City-State-Zip: N. BILLERICA MA 01862

*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:** NIEDZWIECKI , DANIEL M.

**SECRETARY**

04/23/2022

Electronic Signature of Signing Officer/Director Detail

Date