2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000000748

Entity Name: ETON PHARMACEUTICALS, INC.

Current Principal Place of Business:

21925 W FIELD PKWY, STE 235 DEER PARK. IL 60010-7208

Current Mailing Address:

21925 W FIELD PKWY, STE 235 DEER PARK. IL 60010-7208 US

FEI Number: 37-1858472 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 N CALHOUN ST STE 4 TALLAHASSEE, FL 32301 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

FILED Apr 25, 2019

Secretary of State

9264099321CC

Officer/Director Detail:

Title C,CEO, P, D Title VC

Name BRYNJELSEN, SEAN E Name BAUM, MARK

Address 21925 W FIELD PKWY, STE 235 Address 21925 W FIELD PKWY, STE 235 City-State-Zip: DEER PARK IL 60010-7208 City-State-Zip: DEER PARK IL 60010-7208

Title D Title D

Name CASAMENTO, CHARLES Name CASAMENTO, NORBERT

Address 21925 W FIELD PKWY, STE 235 Address 21925 W FIELD PKWY, STE 235

City-State-Zip: DEER PARK IL 60010-7208 City-State-Zip: DEER PARK IL 60010-7208

Title D Title S,T

Name MAIER, PAUL V Name TROUTMAN, W.WILSON

Address 21925 W FIELD PKWY, STE 235 Address 21925 W FIELD PKWY, STE 235

City-State-Zip: DEER PARK IL 60010-7208 City-State-Zip: DEER PARK IL 60010-7208

Title AS, AT

Name KREMPA, DAVID

Address 21925 W FIELD PKWY, STE 235 City-State-Zip: DEER PARK IL 60010-7208

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: W. WILSON TROUTMAN

CORP SECRETARY

04/25/2019