

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000001136

**Entity Name:** PATHEON API MANUFACTURING INC.**Current Principal Place of Business:**309 DELAWARE STREET  
GREENVILLE, SC 29605**Current Mailing Address:**309 DELAWARE STREET  
GREENVILLE, SC 29605 US**FEI Number:** 01-0624735**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAPITOL CORPORATE SERVICES, INC.  
515 EAST PARK AVENUE, 2ND FL  
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**Officer/Director Detail :**

Title            PRESIDENT, SECRETARY  
Name            BRIANSKY, SHARON S  
Address        168 THIRD AVENUE  
City-State-Zip: WALTHAM MA 02451

Title            ASST. SECRETARY  
Name            BRUNI, JAMES E  
Address        300 INDUSTRY DRIVE  
City-State-Zip: PITTSBURGH PA 15275

Title            ASST. TREASURER  
Name            SPELLMAN, MAURA A.  
Address        168 THIRD AVENUE  
City-State-Zip: WALTHAM MA 02451

Title            TREASURER, ASST. SECRETARY  
Name            SMITH, ANTHONY H  
Address        168 THIRD AVENUE  
City-State-Zip: WALTHAM MA 02451

Title            ASST. SECRETARY  
Name            CONNER, JASON B.  
Address        4815 EMPEROR BLVD, STE 300  
City-State-Zip: DURHAM NC 27703

Title            ASST. SECRETARY  
Name            MICHAUD, MICHAEL K.  
Address        168 THIRD AVENUE  
City-State-Zip: WALTHAM MA 02451

*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: JAMES E BRUNI****ASSISTANT SECRETARY    05/05/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date