

2021 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F19000002812

Entity Name: BIONEICINE CORP.**Current Principal Place of Business:**3845 FIFTH AVENUE NORTH
ST PETERSBURG, FL 33713**Current Mailing Address:**3845 FIFTH AVENUE NORTH
ST PETERSBURG, FL 33713 US**FEI Number:** 82-4953381**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BOWDEN BARLOW LAW PA
3845 FIFTH AVENUE NORTH
ST PETERSBURG, FL 33713 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:** JESSIE E BOWDEN

10/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ALBERT, PRADEEP DR.
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title SECRETARY
Name SABA, FADI DR.
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title TREASURER
Name NICHOLS, CHRISTIE
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name HAVERCROFT, NICHOLAS
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name SPUZA, MICHAEL DR.
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name KLEIN, JESSE DR.
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name SIMONIAN, LEN
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name REINISCH, HANS DR.
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

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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: PRADEEP ALBERT

PRESIDENT

10/29/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KINDE, JAKOB
Address 3845 FIFTH AVENUE NORTH
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name PELL, DONALD DR.
Address 125 ESTADO WAY NE
City-State-Zip: ST. PETERSBURG FL 33704

Title DIRECTOR
Name MESSINA, PAUL
Address 602 VIENTO DE AVILA
City-State-Zip: TAMPA FL 33613