

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000004236

Entity Name: INTEGRATED PHARMACY SOLUTIONS, INC.

Current Principal Place of Business:

309 NW TOSCANE TRAIL
PORT ST LUCIE, FL 34986

Current Mailing Address:

309 NW TOSCANE TRAIL
PORT ST LUCIE, FL 34986 US

FEI Number: 04-3377392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEPIETRO, STEPHEN
309 NW TOSCANE TRAIL
PORT ST LUCIE, FL 34986 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: STEPHEN DEPIETRO

04/20/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, SECRETARY,
 TREASURER
Name MOEN, MATT C
Address 46 FOX RUN RD
City-State-Zip: BOLTON MA 01740

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: MATT C. MOEN

PRESIDENT

04/20/2023

Electronic Signature of Signing Officer/Director Detail

Date