

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001600

FILED
Feb 08, 2012
Secretary of State

Entity Name: PHARMAJET INC.

Current Principal Place of Business:

400 CORPORATE CIRCLE, SUITE N
GOLDEN, CO 80401

New Principal Place of Business:

Current Mailing Address:

400 CORPORATE CIRCLE, SUITE N
GOLDEN, CO 80401

New Mailing Address:

FEI Number: 20-3058403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PIZ DR., SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CB
Name: POTTERS, HEATHER
Address: 400 CORPORATE CIRCLE, SUITE N
City-St-Zip: GOLDEN, CO 80401

Title: D
Name: PEDRIKS, MARKUS
Address: 400 CORPORATE CIRCLE, SUITE N
City-St-Zip: GOLDEN, CO 80401

Title: PRES
Name: BOWMAN, JIM
Address: 400 CORPORATE CIRCLE, SUITE N
City-St-Zip: GOLDEN, CO 80401

Title: D
Name: DUNCAN, KIM
Address: 400 CORPORATE CIRCLE, SUITE N
City-St-Zip: GOLDEN, CO 80401

Title: D
Name: ALLARD, TONY
Address: 400 CORPORATE CIRCLE, SUITE N
City-St-Zip: GOLDEN, CO 80401

Title: CFO
Name: CULLUM, MAUREEN L
Address: 400 CORPORATE CIRCLE, SUITE N
City-St-Zip: GOLDEN, CO 80401

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: MAUREEN L. CULLUM

CFO

02/08/2012

Electronic Signature of Signing Officer or Director

Date