

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 JAN 25 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F 97000005905

1. Corporation Name

Pharmed Group Holdings, Inc.

Principal Place of Business

3075 NW 107 Ave
Miami, FL 33172

Mailing Address

3075 NW 107 Ave
Miami, FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/07/1997

4. FEI Number

65-0717189

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Sánchez, Charles J.
3075 NW 107 Ave
Miami, FL 33172

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME de Cespedes, Carlos M.

STREET ADDRESS 3075 NW 107 Ave

CITY-ST-ZIP Miami, FL 33172

TITLE ☐ DELETE

NAME de Cespedes, Jorge L.

STREET ADDRESS 3075 NW 107 Ave

CITY-ST-ZIP Miami, FL 33172

TITLE ☒ DELETE

NAME Asst. S.D. Baldwin, William A.

STREET ADDRESS 3075 NW 107 Ave

CITY-ST-ZIP Miami, FL 33172

TITLE ☒ DELETE

NAME Garcia, Leo

STREET ADDRESS 3075 NW 107 Ave

CITY-ST-ZIP Miami, FL 33172

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Exec. VP, CFO, S.D. ☒ Change ☐ Addition

1.2 NAME Perez, Bertin J.

1.3 STREET ADDRESS 3075 NW 107 Ave

1.4 CITY-ST-ZIP Miami, FL 33172

2.1 TITLE Asst. S.D. ☐ Change ☒ Addition

2.2 NAME Sanchez, Charles J.

2.3 STREET ADDRESS 3075 NW 107 Ave

2.4 CITY-ST-ZIP Miami, FL 33172

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles J. Sanchez

01-25-99

(301) 592-2324

CR2E034 (1/1/98)