

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 JUN -5 AM 9:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F99000001255

1. Entity Name  
PAMI McKesson, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
3 World Financial Center  
Suite, Apt. #, etc.

3. Mailing Address  
101 Hudson Street  
Suite, Apt. #, etc.  
39th Floor

DO NOT WRITE IN THIS SPACE

City & State  
New York, NY

City & State  
Jersey City, NJ

4. FEI Number  
13-407414

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Zip 10285 Country

Zip 07302 Country

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
CORPORATION SERVICES, COMPANY

Street Address (P.O. Box Number is Not Acceptable)  
1201 Hays Street

City Tallahassee FL Zip Code 32301

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE  
NAME  
P  
Karen E. Blakely  
STREET ADDRESS  
3 World Financial Center  
CITY-STATE-ZIP  
New York, NY 10285

TITLE  
NAME  
T  
Daniel O Minerva  
STREET ADDRESS  
3 World Financial Center  
CITY-STATE-ZIP  
New York, NY 10285

TITLE  
NAME  
S  
Jennifer Marre  
STREET ADDRESS  
3 World Financial Center  
CITY-STATE-ZIP  
New York, NY 10285

TITLE  
NAME  
D  
Joseph J Flannery  
STREET ADDRESS  
3 World Financial Center  
CITY-STATE-ZIP  
New York, NY 10285

TITLE  
NAME  
V  
Barry J O'Brien  
STREET ADDRESS  
101 Hudson Street  
CITY-STATE-ZIP  
Jersey City, NJ 07302

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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CITY-STATE-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barry J O'Brien

Date

4-24-02

Daytime Phone #

701-524-5822

CR2E034B (7/2/01)