

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000132531

Entity Name: PHARMATOKA, INC.

FILED  
Jul 23, 2009  
Secretary of State

## Current Principal Place of Business:

781 CRANDON BOULEVARD  
106  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

## Current Mailing Address:

15 TOMMYS LANE  
EAST FREETOWN, MA 02717 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VIGNERON, THIERRY  
781 CRANDON BOULEVARD  
106  
KEY BISCAYNE, FL 33149 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HAESAERTS, GUNTER  
Address: 781 CRANDON BOULEVARD, SUITE 106  
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: VP ( ) Delete  
Name: VIGNERON, ALINE N  
Address: 781 CRANDON BOULEVARD, SUITE 106  
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: VP ( ) Delete  
Name: THORDUR, JOHANNSSON  
Address: 781 CRANDON BOULEVARD, SUITE 106  
City-St-Zip: KEY BISCAYNE, FL 33149 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALINE VIGNERON

VP

07/23/2009

Electronic Signature of Signing Officer or Director

Date