

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000043853

Entity Name: PHARMAMED USA INC.

Current Principal Place of Business:

4970 SW 52 STREET SUITE 313
DAVIE, FL 33314

Current Mailing Address:

4970 SW 52 STREET SUITE 313
DAVIE, FL 33314 US

FEI Number: 37-1636730

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MORATO, PAULA C
6412 SW 55 PL
DAVIE, FL 33314 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: PAULA CATALINA MORATO

01/17/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name LOPERA, JULIAN A
Address 6412 SW 55 PL
City-State-Zip: DAVIE FL 33314

Title PRESIDENT
Name MORATO, PAULA C PRESIDENT
Address 6412 SW 55 PLACE
City-State-Zip: DAVIE FL 33314

Title DIRECTOR
Name LOPERA, SERGIO ANDRES
Address 4970 SW 52 STREET SUITE 313
City-State-Zip: DAVIE FL 33314

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: JULIAN LOPERA

VP

01/17/2019

Electronic Signature of Signing Officer/Director Detail

Date