

**2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P14000029305

**Entity Name:** MAXIMA USA CORP

**Current Principal Place of Business:**

6187 NW 167 ST H18  
MIAMI, FL 33015

**Current Mailing Address:**

6187 NW 167 ST H18  
MIAMI, FL 33015 US

**FEI Number:** 46-5428287

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MOLINA, SURELY  
7500 NW 25TH STREET  
SUITE#246  
MIAMI, FL 33122 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ORPHAN PHARMA US, LLC  
Address 7500 NW 25TH STREET  
SUITE#246  
City-State-Zip: MIAMI FL 33122

Title SECRETARY  
Name SANCHO, JOSE ANDRES  
Address 5100 BURCHETTE RD  
# 3004  
City-State-Zip: TAMPA FL 33647

*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:** SURELY MOLINA

**REGISTERED AGENT**

**09/16/2019**

Electronic Signature of Signing Officer/Director Detail

Date