

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000064834

Entity Name: AMC PHARMACEUTICALS FLORIDA, INC.**Current Principal Place of Business:**ONE TAMPA CITY CENTER
STE 2880
TAMPA, FL 33602**Current Mailing Address:**2102 WEST CASS STREET
STE 200
TAMPA, FL 33606 UN**FEI Number:** 87-2895956**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CUSACK, JAMES
ONE TAMPA CITY CENTER
STE 2880
TAMPA, FL 33602 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	PRES
Name	YESSIN, BRENT W ESQ.
Address	ONE TAMPA CITY CENTER, STE 2880
City-State-Zip:	TAMPA FL 33602
Title	VP
Name	GENTRY, BETSY L
Address	ONE TAMPA CITY CENTER, STE 2880
City-State-Zip:	TAMPA FL 33602

Title	GC
Name	YESSIN, BRENT J ESQ.
Address	ONE TAMPA CITY CENTER, STE 2880
City-State-Zip:	TAMPA FL 33602
Title	VP
Name	SCOTT, BRETT P
Address	2030 MAIDEN LANE
City-State-Zip:	WENATCHEE WA 98801

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: BRENT W YESSIN

CEO

04/30/2022

Electronic Signature of Signing Officer/Director Detail_____
Date