## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000146477

Entity Name: IMMUGEN PHARMA LLC

**Current Principal Place of Business:** 

7900 RED ROAD SUITE #26 MIAMI, FL 33143 FILED
Apr 14, 2022
Secretary of State
6085972178CC

## **Current Mailing Address:**

7900 RED ROAD SUITE #26 SOUTH MIAMI, FL 33143 US

FEI Number: 83-1450619 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FATER, DAVID H 7900 RED ROAD SUITE 26 SOUTH MIAMI, FL 33143 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

## Authorized Person(s) Detail:

Title MGR Title MGR

Name TRAVIS, CRAIG DR. Name FATER, DAVID

Address 7900 RED ROAD Address 7900 RED ROAD

SUITE #26 SUITE #26

City-State-Zip: MIAMI FL 33143 City-State-Zip: MIAMI FL 33143

Title MGR Title MGR

Name MASSEY, WILLIAM DR. Name HAINES, HAL DR.

Address 7900 RED ROAD Address 7900 RED ROAD

SUITE #26 SUITE #26

City-State-Zip: MIAMI FL 33143 City-State-Zip: MIAMI FL 33143

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG R TRAVIS

CEO AND PRESIDENT

04/14/2022