

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001412

Entity Name: LEO PHARMA INC.

**Current Principal Place of Business:**

7 GIRALDA FARMS  
2ND FLOOR  
MADISON, NJ 07940

**Current Mailing Address:**

7 GIRALDA FARMS  
2ND FLOOR  
MADISON, NJ 07940 US

FEI Number: 80-0485929

Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 SECRETARY  
Name NEUWIRTH, ALAN J  
Address 101 PARK AVE  
City-State-Zip: NEW YORK NY 10178

Title TREASURER  
Name BERNIUS, KEITH  
Address 7 GIRALDA FARMS  
2ND FLOOR  
City-State-Zip: MADISON NJ 07940

Title DIRECTOR  
Name MAZZACCO, CATHERINE  
Address 7 GIRALDA FARMS 2ND FLOOR  
City-State-Zip: MADISON NJ 07940

Title DIRECTOR  
Name KRONBORG, ANDERS  
Address 7 GIRALDA FARMS 2ND FLOOR  
City-State-Zip: MADISON NJ 07940

Title PRESIDENT  
Name POSNER, CHRISTOPHER  
Address 7 GIRALDA FARMS  
2ND FLOOR  
City-State-Zip: MADISON NJ 07940

*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: ALAN J. NEUWIRTH

SECRETARY

03/05/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date