

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000005588

**Entity Name:** MODERNIZING MEDICINE RETAIL SOLUTIONS, INC.

**Current Principal Place of Business:**

4850 T-REX AVENUE  
SUITE 200  
BOCA RATON, FL 33431

**Current Mailing Address:**

4850 T-REX AVENUE  
SUITE 200  
BOCA RATON, FL 33431 US

**FEI Number:** 81-0821222

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	CEO, DIRECTOR	Title	CHIEF LEGAL OFFICER, SECRETARY
Name	CANE, DANIEL	Name	CEULE, DENISE
Address	4850 T-REX AVENUE SUITE 200	Address	4850 T-REX AVENUE SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	EXECUTIVE VICE PRESIDENT AND CHIEF FINANCIAL OFFICER	Title	CHIEF MEDICAL AND STRATEGY OFFICER
Name	SCHEER, MICHELLE	Name	SHERLING, MICHAEL
Address	4850 T-REX AVENUE SUITE 200	Address	4850 T-REX AVENUE SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	PRESIDENT, COO	Title	ASST. SECRETARY
Name	HARPAZ, JOSEPH	Name	HORAN, PATRICK
Address	4850 T-REX AVENUE SUITE 200	Address	4850 T-REX AVENUE SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431

*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:** PATRICK HORAN

**ASSISTANT SECRETARY** 05/01/2023

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

\_\_\_\_\_  
Date