

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001246

Entity Name: INVAGEN PHARMACEUTICALS INC.

Current Principal Place of Business:

7 OSER AVE.
HAUPPAUGE, NY 11788

Current Mailing Address:

7 OSER AVE.
HAUPPAUGE, NY 11788 US

FEI Number: 20-1420845

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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, PRESIDENT
Name VERMA, ARUNESH
Address 10 INDEPENDENCE BLVD.
City-State-Zip: WARREN NJ 07059

Title SECRETARY, TREASURER
Name MUNDRA, MOHIT
Address 550 S. RESEARCH PLACE
City-State-Zip: CENTRAL ISLIP NY 11722

Title DIRECTOR
Name VOHRA, UMANG
Address CIPLA HOUSE, PENINSULA BUSINESS
PARK, TOWER C
GANPATRAO KADAM MARG, LOWER
PAREL
City-State-Zip: MUMBAI 013

Title DIRECTOR
Name HAMIED, SAMINA
Address CIPLA HOUSE, PENINSULA BUSINESS
PARK, TOWER C
GANPATRAO KADAM MARG, LOWER
PAREL
City-State-Zip: MUMBAI 013

Title CFO
Name AGARWAL, DEEPAK
Address 550 S. RESEARCH PLACE
City-State-Zip: CENTRAL ISLIP NY 11722

Title DIRECTOR
Name MALLAVARAPU, SRINIVAS
Address 10 INDEPENDENCE BOULEVARD
SUITE 300
City-State-Zip: WARREN NJ 07059

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: MOHIT MUNDRA

**SECRETARY AND
TREASURER**

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date