

**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F23000002794

**Entity Name:** AIM TARGETED THERAPIES, INC.**Current Principal Place of Business:**260 CRANDON BLVD.,  
SUITE 31  
KEY BISCAYNE, FL 33149**Current Mailing Address:**260 CRANDON BLVD.,  
SUITE 31  
KEY BISCAYNE, FL 33149 US**FEI Number:** 87-4138859**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ABRAHMSOHN, GLENN  
260 CRANDON BLVD.,  
SUITE 31  
KEY BISCAYNE, FL 33149 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	C
Name	ABRAHMSOHN, GLENN
Address	260 CRANDON BLVD., SUITE 31
City-State-Zip:	KEY BISCAYNE FL 33149

Title	D
Name	ABRAHMSOHN, JO
Address	795 HARBOR DR.
City-State-Zip:	KEY BISCAYNE FL 33149

Title	D
Name	NAIR, AMIT
Address	ST.JOHN'S INNOVATION CENTRE COWLEY ROAD
City-State-Zip:	CAMBRIDGE CB4 0WS

Title	D
Name	ABRAHMSOHN, GLENN
Address	795 HARBOR DR.
City-State-Zip:	KEY BISCAYNE FL 33149

Title	D
Name	KIRN-SLABOSZEWICZ, MARK
Address	720 NE 69TH ST., #9N
City-State-Zip:	MIAMI FL 33138

Title	D
Name	TANNEHILL, DOUG
Address	750 NE 112TH STREET
City-State-Zip:	BISCAYNE PARK FL 33161

*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:** GLENN ABRAHMSOHN

C

01/02/2025

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