

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002517

Entity Name: MAGNA PHARMACEUTICALS, INC.

Current Principal Place of Business:

10801 ELECTRON DRIVE
SUITE #100
LOUISVILLE, KY 40299

Current Mailing Address:

10801 ELECTRON DRIVE
SUITE #100
LOUISVILLE, KY 40299 US

FEI Number: 61-1185441

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	P	Title	SECRETARY
Name	LESSER, WARREN P	Name	LESSER, MARY P
Address	10801 ELECTRON DRIVE SUITE # 100	Address	10801 ELECTRON DRIVE SUITE #100
City-State-Zip:	LOUISVILLE KY 40299	City-State-Zip:	LOUISVILLE KY 40299

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: MARY P LESSER

VP OF ADMINISTRATION **02/12/2024**

Electronic Signature of Signing Officer/Director Detail

Date