



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

MAY 16 2023

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1. Entity ID Number <b>001724683</b>		2. Exact name of the Corporation <b>MMJ Biopharma Cultivation Inc</b>												
3. Principal Office Address <b>14930 Reflection Key Circle #2511</b>			City <b>Fort Myers</b>		State <b>FL3397</b>									
			Zip <b>33907</b>											
4. NAICS Code <b>325412</b>		6. Brief description of the character of business conducted in Rhode Island <b>Pharmaceutical Development</b>												
5. State of Incorporation <b>DE</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>Duane Boise</b>			Vice-President Name <b>NONE</b>											
Street Address <b>14930 Reflection Key Circle</b>			Street Address											
City <b>Fort Myers</b>	State <b>FL</b>	Zip <b>May 8, 20</b>	City	State	Zip									
Secretary Name <b>Ellen Kearney</b>			Treasurer Name <b>Same as Secretary</b>											
Street Address <b>14930 Reflection Key Circle</b>			Street Address											
City <b>Fort Myers</b>	State <b>FL</b>	Zip <b>33907</b>	City	State	Zip									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>Kevin Brett</b>			Director Name <b>NONE</b>											
Street Address <b>2931 Jolly Road</b>			Street Address											
City <b>Plymouth Meeting</b>	State <b>PA</b>	Zip <b>19462</b>	City	State	Zip									
Director Name <b>NONE</b>			Director Name <b>NONE</b>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
This information is currently of record in the Department of State.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
Changes require an additional filing.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS-SERIALS</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>1500</b></td> <td><b>A-1</b></td> <td><b>\$0.0001</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS-SERIALS	PAR VALUE	<b>1500</b>	<b>A-1</b>	<b>\$0.0001</b>			
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<b>1500</b>	<b>A-1</b>	<b>\$0.0001</b>												
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.														
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>														
Name of Authorized Representative <b>Ellen Kearney</b>					Date <b>May 8, 2023</b>									
Signature of Authorized Representative 														

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov