

COMPLETION CHECKLIST

Have you completed the form correctly?

- Completed all sections (or ruled them 'not applicable')
- If you ticked f, g or i (and i includes a company) in Section 4 have you provided certified copies of the following documentation with this application:
 - Certificate of Incorporation
 - a current ASIC historical extract detailing all shareholders [together with the size of their shareholdings (percentages owned)] and directors of the company
 - the corporation's current Constitution detailing the voting rights of all shareholders so that the Board can be satisfied only registrants have voting rights.
- If the company structure above includes any relatives or family members, have you provided
 - copies of birth certificates
 - copies of marriage certificates
- Yes, I have included all the required documentation

**INCOMPLETE OR INCORRECT NOTIFICATIONS
WILL NOT BE PROCESSED
AND
WILL BE RETURNED**

Please forward the completed form and accompanying documentation to:

Medicines Regulation and Quality
Chief Health Officer Branch
Locked Bag 21
FORTITUDE VALLEY BC QLD 4008

Tel: 07 3328 9808



Department of Health

Pharmacy Change of Ownership Notification Form

IMPORTANT INFORMATION:

The legislation relating to Pharmacy Ownership is found in the *Pharmacy Business Ownership Act 2001*. The Department of Health requires documentary evidence that the proposed ownership complies with the requirements of this legislation.

The full copy of the legislation can be view at:

<https://www.legislation.qld.gov.au/LEGISLTN/CURRENT/P/PharmReqA01.pdf>

This form contains nine sections which must be fully completed. If a section is not applicable, put a single line through the section and write "N/A".

1. To enable processing and advice to Medicare Australia, forms should be received by the Queensland Department of Health at least six weeks prior to an upcoming change in ownership.

It should also be noted that the legislation requires notification about change in ownership or the change in particulars about a pharmacy ownership no later than 21 days after such changes. Failure to do so might result in a penalty.
2. The Queensland Department of Health will advise Medicare Australia of the new ownership profile if the proposed change complies with the ownership provisions of the Act.
3. This form is to be witnessed by a Justice of the Peace or a Commissioner for Declarations.
4. Each relevant pharmacist (a person who starts to own the business or a person who ceases to own the business) involved in the pharmacy business, or where particulars of the ownership have changed, then the owner, is to complete and return a separate form (including those whose profile is not changing).
5. If this proposed change in ownership does not occur, you are to advise the Queensland Department of Health in writing, within 14 days to ensure that your correct ownership information is held.
6. Please direct all enquiries relating to pharmacy ownership to email:
PharmacyOwnership@health.qld.gov.au.

Section 4 **NOT APPLICABLE**

Details of % change in a pharmacy
(a) increasing ownership % from% to%
(b) decreasing ownership % from% to%
(c) ownership % staying the same%

Section 5

Both parts below must be completed.

(a) All current owners: Irrelevant information under s73 of the RTI Act
(Company names where applicable)

(b) All proposed owners: Irrelevant information under s73 of the RTI Act
(Company names where applicable)

(If this change affects a "large" partnership, e.g. limited partnership, please attach a copy of the complete pharmacy ownership profile to this form.)

Section 6 **NOT APPLICABLE**

If you ticked f, g or i (and i includes a company) in Section 4 you will be required to provide certified copies of the following documentation with this application:

- 1. Certificate of Incorporation
- 2. a ~~current~~ ASIC historical extract detailing all shareholders (together with the size of their shareholdings (percentages owned)) and directors of the company
- 3. the corporation's current Constitution detailing the voting rights of all shareholders so that the Board can be satisfied only registrants have voting rights.

PLEASE NOTE: If the Corporation's Constitution does not clearly detail the voting rights of all shareholders, you must provide a letter from your solicitor, accountant etc outlining the voting rights of all shareholders. If your submitted documentation does not clearly detail the voting rights of all shareholders, your application will be delayed.

Section 8 Company Details **NOT APPLICABLE**

Please use a separate page for each company.

If purchasing a pharmacy as a company you must provide us with the following information:

Please detail all shareholders and directors and the current percentage they own in the company.

Name of Director/Shareholder	Pharmacists Registration No. (if applicable)	Relationship to Pharmacist. (i.e. wife, husband, sibling etc)	Percentage of company owned.
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			

RTI Released

From the date of the proposed change, my ownership in Queensland Pharmacies will be as follows:
 NB. If you will no longer hold an ownership interest in a Queensland Pharmacy write "NIL".

COMPLETION CHECKLIST

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- If you ticked f, g or i (and i includes a company) in Section 4 have you provided certified copies of the following documentation with this application:
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 - a current ASIC historical extract detailing all shareholders (together with the size of their shareholdings (percentages owned)) and directors of the company
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- If the company structure above includes any relatives or family members, have you provided
 - copies of birth certificates
 - copies of marriage certificates
- Yes, I have included all the required documentation

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Medicines Regulation and Quality
Chief Health Officer Branch
Locked Bag 21
FORTITUDE VALLEY BC QLD 4006

Tel: 07 3328 9808

LEKARNA PTY LTD 164 104 161
ASIC - Current Extract - LEKARNA PTY LTD ACN: 164 104 161

This extract contains information derived from the Australian Securities and Investment Commission's (ASIC) database under section 1274A of the Corporations Act 2001.
Please advise ASIC of any error or omission which you may identify.

IDENTIFICATION

ACN: 164 104 161
ABN: 19 164 104 161
Current Company Name: LEKARNA PTY LTD
Registered In: Victoria
Place of Registration:
Registration Date: 04/06/2013
Previous State Number:
Governance Type:
Review Date: 04/06/2015

CURRENT COMPANY DETAILS

Name: LEKARNA PTY LTD
Period from: 04/06/2013
Name Start: 04/06/2013
Status: REGISTERED
Type: AUSTRALIAN PROPRIETARY COMPANY
Class: LIMITED BY SHARES
Subclass: PROPRIETARY COMPANY
Disclosing Entity: N

Doc# 1E9435375

CURRENT COMPANY ADDRESS

Address Type: Registered Office
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Period from: 04/06/2013
Address Type: Principal Place of Business
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Period from: 04/06/2013

Doc# 1E9435375

Doc# 1E9435375

CURRENT COMPANY OFFICERS

Role: Director
Name: GIANNOPOULOS, PETER
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Date of Birth: 16/10/1974
Place of Birth: MELBOURNE VIC
Appointment Date: 04/06/2013
Cease Date:

Doc# 1E9435375

Role: Secretary
Name: GIANNOPOULOS, PETER
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Date of Birth: 16/10/1974
Place of Birth: MELBOURNE VIC
Appointment Date: 04/06/2013
Cease Date:

I HEREBY CERTIFY THAT THIS
DOCUMENT IS A TRUE AND CORRECT
COPY OF THE ORIGINAL.

Doc# 1E9435375



ANTHONY CANNIZZO
Robert James Lawyers
Level 10, 200 Queen Street, Melbourne VIC
An Australian Legal practitioner within the
meaning of the Legal Profession Act 2004

CURRENT SHARE CAPITAL

Class: ORD ORDINARY SHARES

Doc# 1E9435375

Number of Issued "Shares" : 12

Amount Paid: \$12.00

Amount Due: \$0.00

Note: For each class of shares issued by a proprietary company, ASIC records the details of the twenty members of the class (based on shareholdings). The details of any other members holding the same number of shares as the twentieth ranked member will also be recorded by ASIC on the database. Where available, historical records show that a member has ceased to be ranked amongst the twenty members. This may, but does not necessarily mean, that they have ceased to be a member of the company.

CURRENT(SHAREHOLDERS/MEMBER)

Class: ORD

Doc# 1E9435375

Number of Shares Held: 12

Beneficially Owned: Y

Fully Paid: Y

Name: GIANNOPOULOS, PETER

Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078

Joint Holding: N

DOCUMENTS RELATING TO EXTERNAL ADMINISTRATION AND/OR APPOINTMENT OF CONTROLLER

Note: This extract may not list all documents relating to this status. State and Territory records should be searched.

No record

SATISFIED CHARGES

Note: On January 30, 2012 the Personal Property Securities Register (PPS Register) has commenced. The details of current charges will only be available from the PPS Register and the details of satisfied charges (as at 30th January 2012) can be obtained from ASIC. Further information can be obtained from www.ppsr.gov.au.

No record

ASIC DOCUMENTS (except charges)

Notes:

- A date or address shown as UNKNOWN has not been updated since the ASIC to cover the records in 1991.
- Data from Documents with no Date Processed are not included in the Extract.
- Documents with "***" pages have not yet been imaged and are not available via DOCIMAGE. Imaging takes approximately 2 weeks from date of lodgement.
- Documents already listed under charges are not repeated here.

Form Type	Date Received	Date Processed	Effective Date	Pages	Doc No
201	04/06/2013	04/06/2013	04/06/2013	3	1E9435375
Application For Registration as a Proprietary Company					

PRE-ASIC DOCUMENTS

No record

ANNUAL RETURNS

No record

FINANCIAL REPORTS

No record

CURRENT CONTACT ADDRESS FOR ASIC USE ONLY

Note: Section 146A of the Corporations Act 2001 states 'A contact address is the address to which communications and notices are sent from ASIC to the company.'

Address Type: Contact address for ASIC use only

Address: PO BOX 142
ASCOT VALE VIC 3032

Period from: 02/10/2014

Pages 253 through 305 redacted for the following reasons:

s47(3)(b) - exempt in full

LEKARNA PTY LTD 164 104 161
ASIC - Current Extract - LEKARNA PTY LTD ACN: 164 104 161

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Please advise ASIC of any error or omission which you may identify.

IDENTIFICATION

ACN: 164 104 161
ABN: 19 164 104 161
Current Company Name: LEKARNA PTY LTD
Registered in: Victoria
Place of Registration:
Registration Date: 04/08/2013
Previous State Number:
Governance Type:
Review Date: 04/08/2015

CURRENT COMPANY DETAILS

Name: LEKARNA PTY LTD
Period from: 04/06/2013
Name Start: 04/08/2013
Status: REGISTERED
Type: AUSTRALIAN PROPRIETARY COMPANY
Class: LIMITED BY SHARES
Subclass: PROPRIETARY COMPANY
Disclosing Entity: N

Doc# 1E9435375

CURRENT COMPANY ADDRESS

Address Type: Registered Office
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Period from: 04/08/2013
Address Type: Principal Place of Business
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Period from: 04/08/2013

Doc# 1E9435375

Doc# 1E9435375

CURRENT COMPANY OFFICERS

Role: Director
Name: GIANNOPOULOS, PETER
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Date of Birth: 16/10/1974
Place of Birth: MELBOURNE VIC
Appointment Date: 04/06/2013
Cease Date:

Doc# 1E9435375

Role: Secretary
Name: GIANNOPOULOS, PETER
Address: 815 HEIDELBERG ROAD
ALPHINGTON VIC 3078
Date of Birth: 16/10/1974
Place of Birth: MELBOURNE VIC
Appointment Date: 04/06/2013
Cease Date:

Doc# 1E9435375

I HEREBY CERTIFY THAT THIS
DOCUMENT IS A TRUE AND CORRECT
COPY OF THE ORIGINAL.



STEPHANIE McGRATH
Robert James Lawyers
Level 10, 200 Queen Street, Melbourne VIC
An Australian Legal Practitioner within the
meaning of the Legal Profession Act 2004

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 Amount Paid: \$12.00
 Amount Due: \$0.00

Doc# 1E9435375

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CURRENT(SHAREHOLDERS/MEMBER)

Class: ORD
 Number of Shares Held: 12
 Beneficially Owned: Y
 Fully Paid: Y
 Name: GIANNOPOULOS, PETER
 Address: 815 HEIDELBERG ROAD
 ALPHINGTON VIC 3078
 Joint Holding: N

Doc# 1E9435375

DOCUMENTS RELATING TO EXTERNAL ADMINISTRATION AND/OR APPOINTMENT OF CONTROLLER

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PRE-ASIC DOCUMENTS

No record

ANNUAL RETURNS

No record

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Address Type: Contact address for ASIC use only
 Address: PO BOX 142
 ASCOT VALE VIC 3032
 Period from: 02/10/2014



Queensland
Government

Department of Health

Pharmacy Change of Ownership Notification Form

IMPORTANT INFORMATION:

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This form contains **nine sections** which must be fully completed. If a section is not applicable, put a single line through the section and write "N/A".

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It should also be noted that the legislation requires notification about change in ownership or the change in particulars about a pharmacy ownership no later than 21 days after such changes. Failure to do so might result in a penalty.

2. The Queensland Department of Health will advise Medicare Australia of the new ownership profile if the proposed change complies with the ownership provisions of the Act.
3. This form is to be witnessed by a Justice of the Peace or a Commissioner for Declarations.
4. Each relevant pharmacist (a person who starts to own the business or a person who ceases to own the business) involved in the pharmacy business, or where particulars of the ownership have changed, then the owner, is to complete and return a separate form (including those whose profile is not changing).
5. If this proposed change in ownership does not occur, you are to advise the Queensland Department of Health in writing, within 14 days to ensure that your correct ownership information is held.
6. Please direct all enquiries relating to pharmacy ownership to email: PharmacyOwnership@health.qld.gov.au.

Section 1

Details of the Pharmacy which is subject to the proposed change

Pharmacy Name (current): WISHART DAY & NIGHT PHARMACY

Pharmacy Approval Number: _____ Tick if pharmacy is PBS or Non-PBS

Pharmacy Address (current): SHOP 12, 590 MT GRAVATT-CAPALABA ROAD, WISHART QLD 4122

Pharmacy Phone number 07 3849 1290

If the above Pharmacy (or approval number) is being moved and/or renamed, please provide the details below. The address must correspond with details lodged with Medicare Australia.

Pharmacy Name (new): RAMSAY PHARMACY WISHART

Pharmacy Address (new): AS ABOVE

Pharmacy Phone number AS ABOVE

Date of proposed change (if approved) Irrelevant information under s73 of the RTI Act _____

Section 2

Your full Name: JOY CHRISTINE ONG LIM
(ON BEHALF OF THE APPLICANT)

Your mailing address: Irrelevant information under s73 of the RTI Act _____

Your contact phone number : Irrelevant information under s73 of the RTI Act _____

Registration Number*: PHA0000960177

*Can be accessed on the Pharmacy Board of Australia website, <http://www.pharmacyboard.gov.au>

Section 3

This change is occurring as (please tick the relevant box below):

- (a) I am selling my current pharmacist % to a pharmacist
- (b) I am selling my current pharmacist% to a company
- (c) I am selling my current company % to a pharmacist
- (d) I am selling my current company % to a company
- (e) I am buying a % as a pharmacist
- X (f) I am buying a % as a company (BUYING 100%)
- (g) I am amending my current % from myself to a company in which I hold a share
- (h) I am closing an existing pharmacy
- (i) I am opening a new pharmacy
- (j) I am relocating the address of the pharmacy
- (k) I am not changing my ownership profile however a partner is;
- (l) I am relocating an approval number.
- (m) I am undertaking a combination of _____ and _____ above.
- (n) I am increasing/decreasing the size of the pharmacy area
- (o) Other

Section 4

Details of % change in a pharmacy

- (a) increasing ownership % from0.....% to100....%
- (b) decreasing ownership % from% to%
- (c) ownership % staying the same%

Section 5

Both parts below must be completed.

(a) All current owners:

(Company names where applicable) _____

(b) All proposed owners: PHARMAKON ENTERPRISES PTY LTD ACN 607354343

(Company names where applicable) _____

(If this change affects a "large" partnership, e.g. limited partnership, please attach a copy of the complete pharmacy ownership profile to this form.)

Section 6

If you ticked **f, g or i (and j includes a company)** in Section 4 you will be required to provide **certified copies** of the following documentation with this application:

1. Certificate of Incorporation
2. a **current** ASIC historical extract detailing all shareholders [together with the size of their shareholdings (percentages owned)] and directors of the company
3. the corporation's current Constitution detailing the voting rights of all shareholders so that the Board can be satisfied only registrants have voting rights.

PLEASE NOTE: If the Corporation's Constitution does not **clearly** detail the voting rights of all shareholders, you must provide a letter from your solicitor, accountant etc outlining the voting rights of all shareholders. If your submitted documentation does not **clearly** detail the voting rights of all shareholders, your application will be delayed.

Section 7

If the new ownership structure includes *relatives* (as defined by the *Pharmacy Business Ownership Act 2001*), you **must** also provide the following documentation with this application:

1. a **certified copy** of your marriage certificate
2. a statutory declaration stating that you are still married to the person named on the marriage certificate (if in a de facto relationship, please read below for statutory declaration requirements**)
3. the birth certificate/s of children (if children are shareholders/directors) **Please note: children must be at least 18 years of age.** If a child shareholder/director has a different name than stated on their birth certificate (e.g: married daughter) a statement advising that the person named on the birth certificate and the ASIC historical extract are the same.

Please note:

1. If in a de facto relationship, section 32DA of the *Acts Interpretation Act 1954 (Qld)* defines such as a relationship between two persons who are living together as - a couple on a genuine domestic basis, but who are not married to each other or related by family.
2. The term *relative* is defined in the *Pharmacy Business Ownership Act 2001* as:
relative, of a pharmacist, means—
 - (a) the pharmacist's spouse or
 - (b) a child of the pharmacist who is at least 18 years of age.

In deciding whether two persons are living together as a couple on a genuine domestic basis, any of the following circumstances may be taken into account:

1. the nature and extent of their common residence
2. the length of their relationship
3. whether or not a sexual relationship exists or ever existed
4. the degree of financial dependence or interdependence and any arrangement for financial support
5. their ownership, use and acquisition of property
6. their degree of mutual commitment to a shared life, including the care and support of each other
7. the care and support of children
8. the performance of household tasks and
9. the reputation and public aspects of their relationship.

**Accordingly, if a relative is a de facto, a separate statutory declaration from both registrant and de facto stating that their relationship meets the above criteria is required.

Section 8 Company Details

Please use a separate page for each company.

If purchasing a pharmacy as a company you **must** provide us with the following information:

Please detail all shareholders and directors and the current percentage they own in the **company**.

Name of Director/Shareholder	Pharmacists Registration No. (if applicable)	Relationship to Pharmacist. (i.e. wife, husband, sibling etc.)	Percentage of company owned.
JOY CHRISTINE ONG LIM Director <input checked="" type="checkbox"/> Shareholder <input checked="" type="checkbox"/>	PHA0000960177		100%
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			
Director <input type="checkbox"/> Shareholder <input type="checkbox"/>			

From the date of the proposed change, my ownership in Queensland Pharmacies will be as follows:
NB. If you will no longer hold an ownership interest in a Queensland Pharmacy write "NIL".

Section 9 Ownership Details

Pharmacy Name Please write the correct and full Pharmacy name. This must be the same as provided to Medicare Australia.	Pharmacy Address Please write the correct and full address of the Pharmacy including postcode. This must be the same as provided to Medicare Australia.	Full Ownership Profile Include owners' names (registrant name or corporation name) and relevant percentages owned. Percentages <u>must total 100%</u> .
..... N/A Approval Number *
..... N/A Approval Number *
..... N/A Approval Number *
..... N/A Approval Number *
..... N/A Approval Number *

*If available

Name of Pharmacist: JOY CHRISTINE ONG LIM

Signature of Pharmacist: *[Signature]* Date: 24/9/15

Name of JP/Comm.Dec: Hayley Renae Walters

Signature of JP/Comm.Dec: *[Signature]* Date: 24/9/15



COMPLETION CHECKLIST

Have you completed the form correctly?

- Completed all sections (or ruled them 'not applicable')
- If you ticked **f, g or i (and i includes a company)** in **Section 4** have you provided **certified copies** of the following documentation with this application:
 - Certificate of Incorporation
 - a **current** ASIC historical extract detailing all shareholders (together with the size of their shareholdings (percentages owned)) and directors of the company
 - the corporation's current Constitution detailing the voting rights of all shareholders so that the Board can be satisfied only registrants have voting rights.
- If the company structure above includes any relatives or family members, have you provided
 - copies of birth certificates
 - copies of marriage certificates
- Yes, I have included all the required documentation

**INCOMPLETE OR INCORRECT NOTIFICATIONS
WILL NOT BE PROCESSED
AND
WILL BE RETURNED**

Please forward the completed form and accompanying documentation to:

Medicines Regulation and Quality
Chief Health Officer Branch
Locked Bag 21
FORTITUDE VALLEY BC QLD 4006

Tel: 07 3328 9808

Robert James Lawyers

28 September 2015

Our Ref: ATC:SS:125081-22

Medicines Regulation and Quality Chief Health Officer
Branch Locked Bag 21
FORTITUDE VALLEY BC
QLD 4006
By email: PharmacyOwnership@health.qld.gov.au.

Dear Sir/Madam,

Queensland Pharmacy Ownership – Pharmakon Enterprises Pty Ltd

We act for Pharmakon Enterprises Pty Ltd, the purchaser of "Wishart Day & Night Pharmacy" currently operated from Shop 12, 590 Mt Gravatt-Capalaba Road, Wishart QLD 4122.

A copy of Pharmakon Enterprises Pty Ltd's constitution ("Constitution") has been provided. To assist the Board, we confirm that:

1. Joy Christine Ong Lim (PHA0000960177) owns 100% of the shares in Pharmakon Enterprises Pty Ltd (i.e. Ms Lim is the only "member" of the company). The only shares issued in Pharmakon Enterprises Pty Ltd are ordinary "A" class shares.

2. ^{s47(3)(b)}

We trust that this is sufficient to demonstrate that Ms Lim (a registered pharmacist) holds all issued shares in Pharmakon Enterprises Pty Ltd and is therefore the only person with voting rights in relation to the company.

Yours faithfully,

ROBERT JAMES

Stephanie McGrath

Stephanie McGrath

Senior Associate

Direct line: 8628-2039

Email: stephanie@robertjames.com.au

Liability limited by a scheme approved under Professional Standards Legislation.

SS-125081-22-265-V1

Certificate of Registration of a Company

This is to certify that

PHARMAKON ENTERPRISES PTY LTD

Australian Company Number 607 354 343

is a registered company under the Corporations Act 2001 and
is taken to be registered in Queensland.

The company is limited by shares.

The company is a proprietary company.

The day of commencement of registration is
the twenty-ninth day of July 2015.



ASIC

Australian Securities & Investments Commission

STEPHANIE McGRATH
Robert James Lawyers
Level 10, 200 Queen Street, Melbourne VIC
An Australian Legal Practitioner within the
meaning of the Legal Profession
Uniform Law (Victoria)

I HEREBY CERTIFY THAT THIS IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

Issued by the
Australian Securities and Investments Commission
on this twenty-ninth day of July, 2015.

Greg Medcraft
Chairman

CERTIFICATE

PHARMAKON ENTERPRISES PTY LTD 607 354 343
ASIC - Current & Historical Extract - PHARMAKON ENTERPRISES PTY LTD ACN: 607 354 343

This extract contains information derived from the Australian Securities and Investment Commission's (ASIC) database under section 1274A of the Corporations Act 2001.
Please advise ASIC of any error or omission which you may identify.

IDENTIFICATION

ACN: 607 354 343
ABN: 84 607 354 343
Current Company Name: PHARMAKON ENTERPRISES PTY LTD
Registered In: Queensland
Place of Registration:
Registration Date: 29/07/2015
Previous State Number:
Governance Type:
Review Date: 29/07/2016

CURRENT COMPANY DETAILS

Name: PHARMAKON ENTERPRISES PTY LTD Doc# 2E2213482
Period from: 29/07/2015
Name Start: 29/07/2015
Status: REGISTERED
Type: AUSTRALIAN PROPRIETARY COMPANY
Class: LIMITED BY SHARES
Subclass: PROPRIETARY COMPANY
Disclosing Entity: N

CURRENT COMPANY ADDRESS

Address Type: Registered Office Doc# 2E2213482
Address: STRATEGIES 4 U/G/ STRATEGIES 4 U
1 PIPER STREET
CABOOLTURE QLD 4510

Period from: 29/07/2015

Address Type: Principal Place of Business Doc# 2E2213482


Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053

Period from: 29/07/2015

CURRENT COMPANY OFFICERS

Role: Director Doc# 2E2213482
Name: LIM, JOY CHRISTINE ONG
Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053
Date of Birth: 16/12/1982
Place of Birth: PHILIPPINES
Appointment Date: 29/07/2015
Cease Date:

Role: Secretary Doc# 2E2213482
Name: LIM, JOY CHRISTINE ONG
Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053
Date of Birth: 16/12/1982


STEPHANIE McGRATH
Robert James Lawyers
Level 10, 200 Queen Street, Melbourne VIC
An Australian Legal Practitioner within the
meaning of the Legal Profession
Uniform Law (Victoria)

I HEREBY CERTIFY THAT THIS IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

PHARMAKON ENTERPRISES PTY LTD 607 354 343
ASIC - Current & Historical Extract - PHARMAKON ENTERPRISES PTY LTD ACN: 607 354 343

This extract contains information derived from the Australian Securities and Investment Commission's (ASIC) database under section 1274A of the Corporations Act 2001.
Please advise ASIC of any error or omission which you may identify.

IDENTIFICATION

ACN: 607 354 343
ABN: 84 607 354 343
Current Company Name: PHARMAKON ENTERPRISES PTY LTD
Registered in: Queensland
Place of Registration:
Registration Date: 29/07/2015
Previous State Number:
Governance Type:
Review Date: 29/07/2016

CURRENT COMPANY DETAILS

Name: PHARMAKON ENTERPRISES PTY LTD
Period from: 29/07/2015
Name Start: 29/07/2015
Status: REGISTERED
Type: AUSTRALIAN PROPRIETARY COMPANY
Class: LIMITED BY SHARES
Subclass: PROPRIETARY COMPANY
Disclosing Entity: N

Doc# 2E2213482

CURRENT COMPANY ADDRESS

Address Type: Registered Office
Address: STRATEGIES 4 U CI- STRATEGIES 4 U
1 PIPER STREET
CABOOLTURE QLD 4510
Period from: 29/07/2015

Doc# 2E2213482

Address Type: Principal Place of Business
Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053
Period from: 29/07/2015

Doc# 2E2213482

CURRENT COMPANY OFFICERS

Role: Director
Name: LIM, JOY CHRISTINE ONG
Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053
Date of Birth: 16/12/1982
Place of Birth: PHILIPPINES
Appointment Date: 29/07/2015
Cease Date:

Doc# 2E2213482

Role: Secretary
Name: LIM, JOY CHRISTINE ONG
Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053
Date of Birth: 16/12/1982

Doc# 2E2213482

Place of Birth: PHILIPPINES
Appointment Date: 29/07/2015
Cease Date:

CURRENT SHARE CAPITAL

Class: ORD ORDINARY SHARES
Number of Issued "Shares" : 4
Amount Paid: \$4.00
Amount Due: \$0.00

Doc# 2E2213482

Note: For each class of shares issued by a proprietary company, ASIC records the details of the twenty members of the class (based on shareholdings). The details of any other members holding the same number of shares as the twentieth ranked member will also be recorded by ASIC on the database. Where available, historical records show that a member has ceased to be ranked amongst the twenty members. This may, but does not necessarily mean, that they have ceased to be a member of the company.

CURRENT(SHAREHOLDERS/MEMBER)

Class: ORD
Number of Shares Held: 4
Beneficially Owned: Y
Fully Paid: Y
Name: LIM, JOY CHRISTINE ONG
Address: UNIT 73
6 BABARRA STREET
STAFFORD QLD 4053
Joint Holding: N

Doc# 2E2213482

DOCUMENTS RELATING TO EXTERNAL ADMINISTRATION AND/OR APPOINTMENT OF CONTROLLER

Note: This extract may not list all documents relating to this status. State and Territory records should be searched.
No record

SATISFIED CHARGES

Note: On January 30, 2012 the Personal Property Securities Register (PPS Register) has commenced. The details of current charges will only be available from the PPS Register and the details of satisfied charges (as at 30th January 2012) can be obtained from ASIC. Further information can be obtained from www.ppsr.gov.au.
No record

ASIC DOCUMENTS (except charges)

Notes:

- A date or address shown as UNKNOWN has not been updated since the ASIC to over the records in 1991.
- Data from Documents with no Date Processed are not included in the Extract.
- Documents with "***" pages have not yet been imaged and are not available via DOCIMAGE. Imaging takes approximately 2 weeks from date of lodgement.
- Documents already listed under charges are not repeated here.

Form Type	Date Received	Date Processed	Effective Date	Pages	Doc No
201 Application For Registration as a Proprietary Company	29/07/2015	29/07/2015	29/07/2015	3	2E2213482

PRE-ASIC DOCUMENTS

No record

ANNUAL RETURNS

No record

FINANCIAL REPORTS

No record

CURRENT CONTACT ADDRESS FOR ASIC USE ONLY

Note: Section 146A of the Corporations Act 2001 states 'A contact address is the address to which communications and notices are sent from ASIC to the company.'

Address Type: Contact address for ASIC use only
Address: PO BOX 1374
CABOOLTURE QLD 4510
Period from: 04/09/2015

Place of Birth: PHILIPPINES
Appointment Date: 29/07/2015
Cease Date:

CURRENT SHARE CAPITAL

Class: ORD ORDINARY SHARES
Number of Issued "Shares": 4
Amount Paid: \$4.00
Amount Due: \$0.00

Doc# 2E2213482

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Pages 321 through 364 redacted for the following reasons:

s47(3)(b) - exempt in full