

## **ANNOVIS BIO, INC.**

FORM D (Small Company Offering and Sale of Securities Without Registration)

### Filed 01/15/10

Address	1055 WESTLAKES DRIVE, SUITE 300
	BERWYN, PA, 19312
Telephone	610-727-3913
CIK	0001477845
Symbol	ANVS
SIC Code	2834 - Pharmaceutical Preparations
Industry	Biotechnology & Medical Research
Sector	Healthcare
Fiscal Year	12/31

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**UNITED STATES SECURITIES** AND EXCHANGE COMMISSION

Washington, D.C.

### FORM D

Previous Name(s) X None

**OMB APPROVAL** OMB Number: 3235-0076 Expires: June 30, 2012 Estimated Average burden hours per response: 4.0

Notice of Exempt Offering of Securities

#### 1. Issuer's Identity

CIK (Filer ID Number)

0001477845

Name of Issuer

**QR** Pharma, Inc.

Jurisdiction of Incorporation/Organization

DELAWARE

Year of Incorporation/Organization

Over Five Years Ago

Within Last Five Years (Specify Year) 2008

Yet to Be Formed

**Entity Type** 

 $\times$ Corporation

Limited Partnership

Limited Liability Company

**General Partnership** 

**Business Trust** 

Other

#### 2. Principal Place of Business and Contact **Information**

Name of Issuer

QR Pharma, Inc.

Street Address 1 **Street Address 2** 259 N. RADNOR CHESTER ROAD, SUITE #205 City State/Province/Country **ZIP/Postal Code** RADNOR PA 19087

Phone No. of Issuer 484-253-2296

#### **3. Related Persons**

Last Name	First Name		Middle Name	
Maccecchini	Maria		L.	
Street Address 1		Street Address 2		
c/o QR Pharma, Inc.		259 N. Radnor (	Chester Road, Suite #205	
City	State/Province/C	ountry	ZIP/Postal Code	
Radnor	PA		19087	
Relationship:	X Executive Officer	X Director	Promoter	
Clarification of Respon	ise (if Necessary)			
Last Name	First Name		Middle Name	
Blake	Paul			
Street Address 1		Street Address 2		
c/o Aeterna Zentaris	Inc.	4th Floor, 20 Inc	dependence Boulevard	
City	State/Province/C	ountry	ZIP/Postal Code	
Warren	NJ		07059-2731	
Relationship:	Executive Officer	X Director	Promoter	
Clarification of Respon	ise (if Necessary)			
Last Name	First Name		Middle Name	
Broderson	Hal		<b>S.</b>	
Street Address 1		Street Address 2		
c/o Rock Hill Ventur	res, Inc.	1059 Indian Cre	ek Road	
City	State/Province/C	ountry	ZIP/Postal Code	
Wynnewood	PA		19096-3424	
Relationship:	Executive Officer	× Director	Promoter	
Clarification of Respon	ise (if Necessary)			
Last Name	First Name		Middle Name	
Hefti	Franz			
Street Address 1		Street Address 2		
c/o QR Pharma, Inc.		259 N. Radnor (	Chester Road, Suite #205	
City	State/Province/C	ountry	ZIP/Postal Code	
Radnor	PA		19087	
Relationship:	Executive Officer	X Director	Promoter	
Clarification of Respon	ise (if Necessary)			

#### 4. Industry Group

Agriculture	Health Care	Retailing
Banking & Financial Services	<b>Biotechnology</b>	<b>Restaurants</b>
Commercial Banking	Health Insurance	Technology
Insurance	Hospitals & Physicians	Computers
□ Investing	X Pharmaceuticals	Telecommunications
Investment Banking	Other Health Care	<b>Other Technology</b>
Pooled Investment Fund		Travel
Other Banking & Financial Services	□ Manufacturing	Airlines & Airports
	Real Estate	Lodging & Conventions
	Commercial	☐ Tourism & Travel Services
	Construction	Other Travel
	<b>REITS &amp; Finance</b>	Other
	<b>Residential</b>	
	Other Real Estate	
Business Services		
Energy		
Coal Mining		

- Electric Utilities
- Energy Conservation
- Environmental Services
- 🔲 Oil & Gas
- Other Energy

#### 5. Issuer Size

**Revenue Range** 

- X No Revenues
- \$1 \$1,000,000
- \$1,000,001 \$5,000,000
- \$5,000,001 \$25,000,000
- \$25,000,001 \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- **Not Applicable**

Aggregate Net Asset Value Range

- No Aggregate Net Asset Value
- \$1 \$5,000,000
- \$5,000,001 \$25,000,000
- \$25,000,001 \$50,000,000
- \$50,000,001 \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

# 6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Rule 504(b)(1) (not (i), (ii) or (iii))		Rule 505
	Rule 504 (b)(1)(i)	X	Rule 506
	Rule 504 (b)(1)(ii)		Securities Act Section 4(6)
	Rule 504 (b)(1)(iii)		Investment Company Act Section 3(c)
7.	Type of Filing		

X	New Notice	Date of First Sale	2010-01-04	First Sale Yet to Occur
	Amendment			

#### 8. Duration of Offering

Does the Issuer intend this offering to last more than one year?

#### Yes No

#### 9. Type(s) of Securities Offered (select all that apply)

	Pooled Investment Fund Interests		Equity
	Tenant-in-Common Securities	X	Debt
	Mineral Property Securities	$\mathbf{X}$	<b>Option, Warrant or Other Right to Acquire</b> <b>Another Security</b>
X	Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security		Other (describe)

#### **10. Business Combination Transaction**

Is this offering being made in connection with a business combination	□ Ye	s 🛛 No
transaction, such as a merger, acquisition or exchange offer?		

Clarification of Response (if Necessary)

#### 11. Minimum Investment

Minimum investment accepted from any outside investor

\$ 50000 USD

#### **12. Sales Compensation**

Recipient			Recipient CRD Number		None
(Associated) Broker or Dealer		None	(Associated) Broker or Dealer Number		None
Street Address 1			Street Address 2		
City		State/Provi	nce/Country	ZIP/Postal Co	de
State(s) of Solicitation	All States				

#### 13. Offering and Sales Amounts

Total Offering Amount	\$ 1000000 USD	Indefinite
Total Amount Sold	\$ 150000 USD	
Total Remaining to be Sold	\$ 850000 USD	Indefinite

Clarification of Response (if Necessary)

#### 14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

#### 15. Sales Commissions & Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$ 0	USD	Estimate
Finders' Fees	\$ 0	USD	Estimate

Clarification of Response (if Necessary)

#### 16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ 60000 USD X Estimate

Clarification of Response (if Necessary)

#### **Signature and Submission**

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

#### Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that the Issuer is not disqualified from relying on any Regulation D exemption it has identified in Item 6 above for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
QR Pharma, Inc.	/s/ Marial L. Maccecchini	Maria L. Maccecchini, Ph. D.	President	2010-01-15