

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003340

Entity Name: SUNOVION PHARMACUTICALS INC.**Current Principal Place of Business:**84 WATERFORD DRIVE
MARLBOROUGH, MA 01752**Current Mailing Address:**84 WATERFORD DRIVE
MARLBOROUGH, MA 01752 US**FEI Number:** 22-2536587**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 DIRECTOR
Name NOMURA, HIROSHI
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title SECRETARY
Name BOKAR, GREG
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title DIRECTOR
Name TADA, MASSAYO
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title DIRECTOR
Name LOEBEL, ANTONY
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title DIRECTOR
Name BABA, HIROYUKI
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title DIRECTOR
Name TAMURA, NOBUHIKO
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title CEO
Name TAMURA, NOBUHIKO
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title CFO
Name FREEMAN, STEVEN
Address 84 WATERFORD DRIVE
City-State-Zip: MARLBOROUGH MA 01752

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: GREG BOKAR**SECRETARY****04/09/2018**

Electronic Signature of Signing Officer/Director Detail

Date