

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000003239

Entity Name: ALTHEADX, INC.

Current Principal Place of Business:

10578 SCIENCE CENTER DRIVE, STE 100
SAN DIEGO, CA 92121

Current Mailing Address:

10578 SCIENCE CENTER DRIVE, STE 100
SAN DIEGO, CA 92121 US

FEI Number: 26-2018451

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 US

FILED
Sep 04, 2015
Secretary of State
CC7907314551

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 CEO
Name HAMILTON, GREG
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title PRESIDENT/CHIEF OPERATING OFFICER
Name GARCES, JORGE PHD
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR/CO-CHAIRMAN OF THE BOARD
Name FERRE', FRANCOIS PHD
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR/CO-CHAIRMAN OF THE BOARD
Name MACOWSKI, J MATTHEW
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name MARQUET, MAGDA PHD
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title D
Name LASHKARI, DEVAL PHD
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title CHIEF MEDICAL OFFICER
Name SALDIVAR, JUAN-SEBASTIAN
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title CFO/SECRETARY
Name BLACK, JEFFREY
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Continues on page 2

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: SONJA NELSON

VP

09/04/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP/OFFICER
Name CENTENO, JOEL
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name GLAVIN, JAMES
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title SVP/OFFICER
Name NASSER, NOAH
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name BODAKEN, BRUCE
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title SVP/OFFICER
Name LUKOWIAK, ANDREW
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name KESSLER, ANN PHD
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title VP/OFFICER
Name NELSON, SONJA
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name EASTHAM, KARIN
Address 10578 SCIENCE CENTER DRIVE, STE 100
City-State-Zip: SAN DIEGO CA 92121