

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000005168

**Entity Name:** COLOR GENOMICS, INC.

**Current Principal Place of Business:**

831 MITTEN ROAD  
STE 100  
BURLINGAME, CA 94010

**Current Mailing Address:**

831 MITTEN ROAD  
STE 100  
BURLINGAME, CA 94010 US

**FEI Number:** 46-3353585

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSEM  
1201 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            CEO  
Name            LARAKI, OTHMAN  
Address        1801 MURCHISON DRIVE, SUITE 128  
City-State-Zip: BURLINGAME CA 94010

Title            CD  
Name            GIL, ELAD  
Address        1801 MURCHISON DRIVE, SUITE 128  
City-State-Zip: BURLINGAME CA 94010

Title            DIRECTOR  
Name            WAGNER, SUSAN L.  
Address        1801 MURCHISON DRIVE, SUITE 128  
City-State-Zip: BURLINGAME CA 94010

Title            DIRECTOR  
Name            TANEJA, HEMANT  
Address        1801 MURCHISON DRIVE, SUITE 128  
City-State-Zip: BURLINGAME CA 94010

*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:** OTHMAN LARAKI

**CEO**

**03/06/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date