

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001220

**Entity Name:** LABVANTAGE SOLUTIONS INC.

**Current Principal Place of Business:**

265 DAVIDSON AVENUE  
SUITE 220  
SOMERSET, NJ 08873

**Current Mailing Address:**

265 DAVIDSON AVENUE  
SUITE 220  
SOMERSET, NJ 08873 US

**FEI Number:** 13-3733484

**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 CHATTERJEE, PURNENDU  
Address 265 DAVIDSON AVENUE  
SUITE 220  
City-State-Zip: SOMERSET NJ 08873

Title PRESIDENT  
Name VELIDI, RAM  
Address 265 DAVIDSON AVENUE  
SUITE 220  
City-State-Zip: SOMERSET NJ 08873

Title DIRECTOR  
Name BHATTACHARYA, SWAPAN  
Address 265 DAVIDSON AVENUE  
SUITE 220  
City-State-Zip: SOMERSET NJ 08873

Title SECRETARY  
Name ARONOWITZ, MARC  
Address 265 DAVIDSON AVENUE  
SUITE 220  
City-State-Zip: SOMERSET NJ 08873

*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:** RAM VELIDI

**PRESIDENT**

**04/04/2018**

Electronic Signature of Signing Officer/Director Detail

Date