

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000005840

Entity Name: IQVIA INC.**Current Principal Place of Business:**100 IMS DRIVE
PARSIPPANY, NJ 07054**Current Mailing Address:**100 IMS DRIVE
PARSIPPANY, NJ 07054 US**FEI Number:** NOT APPLICABLE**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 | VP/S |
| Name | ASHMAN, HARVEY A |
| Address | 100 IMS DRIVE |
| City-State-Zip: | PARSIPPANY NJ 07054 |

| | |
|-----------------|------------------------|
| Title | VP/T |
| Name | LOBOSCO, CATHY |
| Address | 10 WATERVIEW BLVD #100 |
| City-State-Zip: | PARSIPPANY NJ 07054 |

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|-----------------|---------------------|
| Title | VP, ASST. SECRETARY |
| Name | HANSON, J. STILLMAN |
| Address | 100 IMS DRIVE |
| City-State-Zip: | PARSIPPANY NJ 07054 |

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|-----------------|---------------------|
| Title | VP |
| Name | KNOLKER, MICHAEL |
| Address | 100 IMS DRIVE |
| City-State-Zip: | PARSIPPANY NJ 07054 |

| | |
|-----------------|---------------------|
| Title | PRESIDENT |
| Name | ERIC, SHERBET |
| Address | 100 IMS DRIVE |
| City-State-Zip: | PARSIPPANY NJ 07054 |

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: J. STILLMAN HANSON

VICE PRESIDENT

04/03/2018

Electronic Signature of Signing Officer/Director Detail_____
Date