

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000002335

Entity Name: SANDOZ INC.

Current Principal Place of Business:

100 COLLEGE ROAD WEST
PRINCETON, NJ 08540

Current Mailing Address:

100 COLLEGE ROAD WEST
PRINCETON, NJ 08540 US

FEI Number: 38-1658363

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

FILED
Feb 22, 2023
Secretary of State
7619301269CC

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 PRESIDENT
Name HARUVI, KEREN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title TREASURER
Name OBEIDAT, MOHAMMAD
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title CHAIRMAN
Name KENDRIS, THOMAS N.
Address ONE HEALTH PLAZA
City-State-Zip: EAST HANOVER NJ 07936

Title SECRETARY, VP, GENERAL
Name MCDONNELL , KAREN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name MAFFIA, ANTHONY
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name BLAKE, BRYAN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title EXECUTIVE DIRECTOR
Name STENRUD, DOROTHY
Address ONE HEALTH PLAZA
City-State-Zip: EAST HANOVER NJ 07936

Title ASST. TREASURER
Name MARTI , EDUARD
Address ONE HEALTH PLAZA
City-State-Zip: EAST HANOVER NJ 07936

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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: BRYAN BLAKE

AUTHORISED SIGNATOR 02/22/2023

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title VP, COMPLIANCE OFFICER
Name STUECK, EDWARD
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title DIRECTOR
Name MCKENNA, JOHN
Address ONE HEALTH PLAZA
City-State-Zip: EAST HANOVER NJ 07936

Title AUTHORISED REPRESENTATIVE
Name COOK, KEVIN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name ARSENAULT, LEN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title DIRECTOR
Name BISCHOF, MARTIN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title VP
Name SESTAK, PATRICIA
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name ESTELA, SHEILA
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title VP
Name KNOTT, WILLIAM (BILL)
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title DIRECTOR
Name LEVITT, GEOFFREY
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title PRESIDENT
Name HARUVI, KEREN
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title ASST. TREASURER
Name DIGRAVINA, KRISTINA
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name POTT, LESLIE
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name KUMAR, NEEMA
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title VC
Name SAYNOR, RICHARD
Address INDUSTRIESTR. 25,
City-State-Zip: HOLZKIRCHEN DE 83607

Title VP
Name DEGAVRE, TIMOTHY
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540

Title AUTHORISED REPRESENTATIVE
Name OZKAN, TUNA
Address 100 COLLEGE ROAD WEST
City-State-Zip: PRINCETON NJ 08540