

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19085

Entity Name: ROCHE DIAGNOSTICS CORPORATION**Current Principal Place of Business:**9115 HAGUE ROAD
INDIANAPOLIS, IN 46250**Current Mailing Address:**9115 HAGUE ROAD
INDIANAPOLIS, IN 46250 US**FEI Number:** 13-2511923**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O 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	PD
Name	PHILLIPS, JACK J
Address	9115 HAGUE ROAD
City-State-Zip:	INDIANAPOLIS IN 46256

Title	VSD
Name	OLDHAM, STEVE A
Address	9115 HAGUE ROAD
City-State-Zip:	INDIANAPOLIS IN 46256

Title	VP
Name	JOSEPH, CROWLEY
Address	9116 HAGUE ROAD
City-State-Zip:	INDIANAPOLIS IN 46256

Title	TREA
Name	WILSON, SCOTT D
Address	9115 HAGUE ROAD
City-State-Zip:	INDIANAPOIS IN 46256

Title	VP
Name	BURRIS, WAYNE C
Address	9115 HAGUE ROAD
City-State-Zip:	INDIANAPOLIS IN 46256

Title	VP
Name	COTTON, RODNEY D
Address	9115 HAGUE ROAD
City-State-Zip:	INDIANAPOLIS IN 46256

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: SCOTT D. WILSON**TREASURER****04/18/2013**

Electronic Signature of Signing Officer/Director Detail

Date