2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2018
Secretary of State
CC2803191554

DOCUMENT# F04000007065

Entity Name: ROCHE MOLECULAR SYSTEMS, INC.

Current Principal Place of Business:

4300 HACIENDA DRIVE
PLEASANTON, CA 94588

Current Mailing Address:

150 CLOVE ROAD
SUITE 8
LITTLE FALLS, NJ 07424 US

FEI Number: 22-3140457

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	D, ASSISTANT SECRETARY
Name	JOHNSTON, SEAN A
Address	1 DNA WAY
City-State-Zip:	SOUTH SAN FRANCISCO CA 07424

Title	VP
Name	TORRES, MARIO
Address	4300 HACIENDA DRIVE
City-State-Zip:	PLEASANTON CA 94588

Title	P
Name	PAUL, BROWN
Address	4300 HACIENDA DRIVE
City-State-Zip:	PLEASANTON CA 94588

Title	ASSISTANT SECRETARY
Name	FEIGENBAUM, LARRY
Address	1080 US 202
City-State-Zip:	BRANCHBURG NJ 08876

Title	D, VP, SECRETARY
Name	MARKS, KEVIN A
Address	4300 HACIENDA DRIVE
City-State-Zip:	PLEASANTON CA 94588

Title	T
Name	MCDEDE, DAVID
Address	150 CLOVE ROAD SUITE 8
City-State-Zip:	LITTLE FALLS NJ 07424

Title	ASSISTANT SECRETARY
Name	BOHM, GERALD
Address	150 CLOVE ROAD SUITE 8
City-State-Zip:	LITTLE FALLS NM 07424

Title	ASSISTANT TREASURER
Name	RESNICK, BRUCE
Address	1 DNA WAY MS 24
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

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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: KEVIN A. MARKS SECRETARY 02/28/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	VP
Name	WILSON, SCOTT
Address	9115 HAGUE ROAD
City-State-Zip:	INDIANAPOLIS IN 46250