

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002255

Entity Name: STRATA PATHOLOGY SERVICES, INC.

Current Principal Place of Business:

1 CRANBERRY HILL, SUITE 303
LEXINGTON, MA 02421

Current Mailing Address:

1 CRANBERRY HILL, SUITE 303
LEXINGTON, MA 02421

FEI Number: 20-2879668

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 CFO
Name FEENEY, ROBIN
Address 1 CRANBERRY HILL, SUITE 303
City-State-Zip: LEXINGTON MA 02421

Title CEO
Name COHEN, LISA
Address 1 CRANBERRY HILL, SUITE 303
City-State-Zip: LEXINGTON MA 02421

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: ROBIN FEENEY

**CHIEF FINANCIAL
OFFICER**

01/21/2016

Electronic Signature of Signing Officer/Director Detail

Date