

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002800

Entity Name: ACTELION PHARMACEUTICALS US, INC.**Current Principal Place of Business:**5000 SHORELINE COURT
SUITE 200
SOUTH SAN FRANCISCO, CA 94080**Current Mailing Address:**5000 SHORELINE COURT
SUITE 200
SOUTH SAN FRANCISCO, CA 94080 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	DIRECTOR
Name	LOPEZ, DAVID JIMENEZ
Address	5000 SHORELINE COURT SUITE 200
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

Title	DIRECTOR
Name	LIN, QIAN
Address	5000 SHORELINE COURT SUITE 200
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

Title	DIRECTOR
Name	SIMON, SHERLIN
Address	5000 SHORELINE COURT SUITE 200
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

Title	ASSISTANTSECRETARY
Name	ADHOLA, PINTO
Address	5000 SHORELINE COURT SUITE 200
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

Title	TREASURER
Name	LIN, QIAN
Address	5000 SHORELINE COURT SUITE 200
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

Title	ASSISTANTSECRETARY
Name	FOYTLIN, CHERYL
Address	5000 SHORELINE COURT SUITE 200
City-State-Zip:	SOUTH SAN FRANCISCO CA 94080

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: CHERYL FOYTLIN**ASSISTANTSECRETARY****04/24/2021**

Electronic Signature of Signing Officer/Director Detail

Date