

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000000953

Entity Name: GENOMEDX BIOSCIENCES CORP.**Current Principal Place of Business:**6925 LUSK BLVD
SUITE 200
SAN DIEGO, CA 92121**Current Mailing Address:**6925 LUSK BLVD
SUITE 200
SAN DIEGO, CA 92121 US**FEI Number:** 99-0373279**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 TRUESS, JAMES W.
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name HIBBS, KATHY
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name EPSTEIN, ROBERT S. M.D.
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name HOLMES, TODD
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title TREASURER/CFO
Name VETTER, BRENT
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name NOVA, TINA S. PHD
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title DIRECTOR
Name SKINNER, HENRY PHD
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

Title CEO/PRESIDENT
Name NOVA, TINA S. PHD
Address 6925 LUSK BLVD
SUITE 200
City-State-Zip: SAN DIEGO CA 92121

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: BRENT VETTER**TREASURER/CFO****03/31/2022**

Electronic Signature of Signing Officer/Director Detail

Date