2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2021
Secretary of State
3688149491CC

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	Title	DIRECTOR
Name	TRUESS, JAMES W.	Name	HIBBS, KATHY
Address	6925 LUSK BLVD SUITE 200	Address	6925 LUSK BLVD SUITE 200
City-State-Zip:	SAN DIEGO CA 92121	City-State-Zip:	SAN DIEGO CA 92121
Title	DIRECTOR	Title	DIRECTOR
Name	EPSTEIN, ROBERT S. M.D.	Name	HOLMES, TODD
Address	6925 LUSK BLVD SUITE 200	Address	6925 LUSK BLVD SUITE 200
City-State-Zip:	SAN DIEGO CA 92121	City-State-Zip:	SAN DIEGO CA 92121
Title	TREASURER/CFO	Title	DIRECTOR
Name	VETTER, BRENT	Name	NOVA, TINA S. PHD
Address	6925 LUSK BLVD SUITE 200	Address	6925 LUSK BLVD SUITE 200
City-State-Zip:	SAN DIEGO CA 92121	City-State-Zip:	SAN DIEGO CA 92121
Title	DIRECTOR	Title	CEO/PRESIDENT
Name	SKINNER, HENRY PHD	Name	NOVA, TINA S. PHD
Address	6925 LUSK BLVD SUITE 200	Address	6925 LUSK BLVD SUITE 200
City-State-Zip:	SAN DIEGO CA 92121	City-State-Zip:	SAN DIEGO CA 92121

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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: ELAI DAVICIONI, PHD CSO 04/24/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	CSO
Name	DAVICIONI, PHD, ELAI
Address	6925 LUSK BLVD SUITE 200
City-State-Zip:	SAN DIEGO CA 92121