

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000003523

Entity Name: SEQIRUS USA INC.**Current Principal Place of Business:**25 DEFOREST AVENUE
SUITE 200
SUMMIT, NJ 07901**Current Mailing Address:**25 DEFOREST AVENUE
SUITE 200
SUMMIT, NJ 07901 US**FEI Number:** 20-0775200**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:** DONNA ZEBE

05/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name SOLOMON, KRISTINE
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

Title DIRECTOR
Name MINARDO, JOHN
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

Title DIRECTOR
Name MACGREGOR, BRENT
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

Title DIRECTOR
Name LEVY, JOHN
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

Title ASSISTANT SECRETARY
Name GIBBS, SHAWN
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

Title SECRETARY
Name MINARDO, JOHN
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

Title PRESIDENT/CEO
Name MACGREGOR, BRENT
Address 25 DEFOREST AVENUE
 SUITE 200
City-State-Zip: SUMMIT NJ 07901

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: JOHN MINARDO**SECRETARY**

05/29/2020

Electronic Signature of Signing Officer/Director Detail

Date