

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15454

Entity Name: MERCK SHARP & DOHME CORP.**Current Principal Place of Business:**ONE MERCK DRIVE
WHITEHOUSE STATION, NJ 08889**Current Mailing Address:**2000 GALLOPING HILL ROAD
K-1-3049
KENILWORTH, NJ 07033 US**FEI Number:** 22-1261880**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. 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	PRESIDENT/DIRECTOR
Name	KARACHUN, RITA
Address	2000 GALLOPING HILL ROAD
City-State-Zip:	KENILWORTH NJ 07033

Title	ASST. SECRETARY
Name	FEDOSZ, KATIE
Address	2000 GALLOPING HILL ROAD
City-State-Zip:	KENILWORTH NJ 07033

Title	TREASURER, SENIOR VP, DIRECTOR
Name	LITCHFIELD, CAROLINE
Address	2000 GALLOPING HILL ROAD
City-State-Zip:	KENILWORTH NJ 07033

Title	ASST. TREASURER
Name	LEE, JUANITA
Address	2000 GALLOPING HILL ROAD
City-State-Zip:	KENILWORTH NJ 07033

Title	DIRECTOR
Name	FILDERMAN, JON
Address	2000 GALLOPING HILL ROAD K-1-3049
City-State-Zip:	KENILWORTH NJ 07033

Title	SECRETARY
Name	RITTER, GERALYN
Address	2000 GALLOPING HILL ROAD
City-State-Zip:	KENILWORTH NJ 07033

Title	ASST. SECRETARY
Name	BROWN, FAYE C.
Address	2000 GALLOPING HILL ROAD K-1-3049
City-State-Zip:	KENILWORTH NJ 07033

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: FAYE C. BROWN**ASSISTANT SECRETARY** 04/04/2019_____
Electronic Signature of Signing Officer/Director Detail_____
Date