

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(ecrid)) is subject to a penalty fee of \$25.00.

t. Corporate ID No. 513473	2. Name of Corporation CytoSolv, Inc.				
3. Street Address Principal Business Office 155 Pelletier Lane			City Tiverton	State RI	<i>Ζψ</i> 02878
4 Business Phone No. 401-625-1558 5. State of Incorporation Rhode Island					
Brief Description of the Character of Business Conducted in Rhode Island To own and operate a biotech company			, , management		20 000
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS ☐					
Dr. Moses Goddard (and CEO)			Christopher Thanos		
Street Address 155 Pelletier Lane			Street Address 4 Richmond Square, Suite 500		
City: Tiverton	State RI	^{Zip} 02878	City Providence	State RI	##906 ##906
Secretary Name Dr. Moses Goddard			Dr. Moses Goddard		
Street Address 155 Pelletier Lane			Street Address 155 Pelletier Lane		
City Tiverton	State RI	^{Zip} 02878	Cuy Tiverton	State RI	^{Zip} 02878
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name Dr. Moses Goddard			Director Name Richard Horan		
Street Address 155 Pelletier Lane			Street Address 3 Davol Square, Suite A301		
City Tiverton Director Name	RI	Ζίρ 02878	City Providence Director Name	State RI	7.ip 02903
Street Address			Street Address		
City	State	Ζip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value
			9,411	Common	\$0.01 par
					7 :Va : Va : Va : Va : Va : Va : Va : V
This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and affirm that I have examined this report, including any accompanying schedules and affirm that I have examined this report.					
File Date			dhtained herein Signature Dr. Moses	companying schedules and state true and state true and correct. Goddard	that I have examined this report, atements, and that all statements 2/17/10 Date
By:			<i>Print or Type Name</i> ■ President		
FOR SECRETARY OF STATE USE ONLY			Title		