



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>000140655</b>		2. Exact name of the Corporation <b>NABsys, Inc.</b>	
3. Principal office address <b>60 Clifford Street</b>		City <b>Providence</b>	State <b>RI</b>
		Zip <b>02903</b>	
4. Business Phone No. <b>401-276-9100</b>		5. State of Incorporation <b>Delaware</b>	
6. Brief description of the character of business conducted in Rhode Island <b>Biotechnology Research &amp; Development</b>			
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
President Name <b>Barrett Bready</b>		Vice-President Name <b>Steve Nurnberg</b>	
Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>		Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
Secretary Name <b>John Oliver</b>		Treasurer Name <b>John Oliver</b>	
Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>		Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
Director Name <b>Barrett Bready</b>		Director Name <b>Stan Rose</b>	
Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>		Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
Director Name <b>David Martirano</b>		Director Name <b>Ray Stata</b>	
Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>		Street Address <b>% Nabsys, Inc., 60 Clifford Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
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
		12,011,102	PWP
		14,386,201	CWP
		PAR VALUE	
		\$0.001	
		\$0.001	

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.

File Date \_\_\_\_\_  
Check No \_\_\_\_\_  
By \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY

FILED

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Representative

Print or Type Name of Authorized Representative

2/4/13  
Date