



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. 000487863		2. Exact name of the Corporation RxVantage, Inc.			
3. Principal office address 8611 Washington Boulevard			City Culver City	State CA	Zip 90232
4. Business Phone No. (310) 621-4551			5. State of Incorporation DE		
6. Brief description of the character of business conducted in Rhode Island Marketing online schedule system to pharmaceutical representatives					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Daniel B. Gilman			Vice-President Name None		
Street Address c/o RxVantage, Inc., 8611 Washington Boulevard			Street Address		
City Culver City	State CA	Zip 90232	City	State	Zip
Secretary Name Daniel B. Gilman			Treasurer Name Daniel B. Gilman		
Street Address c/o RxVantage, Inc., 8611 Washington Boulevard			Street Address c/o RxVantage, Inc., 8611 Washington Boulevard		
City Culver City	State CA	Zip 90232	City Culver City	State CA	Zip 90232
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name Gregory M. Gilman			Director Name		
Street Address c/o RxVantage, Inc., 8611 Washington Boulevard			Street Address		
City Culver City	State CA	Zip 90232	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" 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	PAR VALUE
			13,500,000	Common	\$0.001
			6,033,786	Preferred	\$0.001

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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: _____

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.

FILED 123

Signature of Authorized Representative _____ Date **June 4, 2013**

FOR SECRETARY OF STATE USE ONLY

Gregory M. Gilman
 Print or Type Name of Authorized Representative

JUN 07 2013
 BY 02190025

Directors, continued

Director Name	Street Address	City	State	Zip
Noah Doyle	c/o Javelin Venture Partners II, L.P. One Rincon Center 101 Spear Street, Suite 255	San Francisco	CA	94105
Bill Kleinfelter	c/o Slater Technology Fund, Inc. 3 Davol Square, Suite 301	Providence	RI	02903

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Shares Issued, continued

Number of Shares	Class/Series	Par Value
6,033,786	Series A	\$0.001

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