RI SOS Filing Number: 201557769820 Date: 03/19/2015 11:03 AM

State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Business Corporation Annual Report

Filing Period: January 1 - March 1

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 (c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000011261

2. Name of Corporation EAST SIDE CLINICAL LABORATORY, INC.

3. Street Address Principal Business Office:

No. and Street: 9737 GREAT HILLS TRAIL
SUITE 100
City or Town: AUSTIN State: TX Zip: 78759 Country: USA

4. Business Phone No.

512-339-1275

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

MEDICAL LABORATORY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	SHERIDAN FOSTER	9737 GREAT HILLS TRAIL, SUITE 100 AUSTIN, TX 78759 USA
PRESIDENT	GARY W. SAMMARCO	9737 GREAT HILLS TRAIL SUITE 100 AUSTIN, TX 78759 USA
ASSISTANT SECRETARY	PAUL J. ALEXANDER	9737 GREAT HILLS TRAIL SUITE 100 AUSTIN, TX 78759 USA
VICE PRESIDENT	THOMAS P. LOHMANN, MD	9737 GREAT HILLS TRAIL SUITE 100

0-8442-0

		AUSTIN, TX 78759 USA
DIRECTOR	DR. COLIN S. GOLDSCHMIDT	14 GIFFNOCK AVENUE MACQUARIE PARK, NSW 2113 AUS
DIRECTOR	CHRISTOPHER D. WILKS	14 GIFFNOCK AVENUE MACQUARIE PARK, NSW 2113 AUS
DIRECTOR	STEPHEN R. SHUMPERT	9737 GREAT HILLS TRAIL SUITE 100 AUSTIN, TX 78759 USA
DIRECTOR	THOMAS P. LOHMANN, MD	9737 GREAT HILLS TRAIL SUITE 100 AUSTIN, TX 78759 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
STK		$0.0000	4,000.00	138

9. 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.

Signed this 19 Day of March, 2015 at 11:03:50 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SHERIDAN FOSTER
Signature of Authorized Representative of the Corporation

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07