



**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

**Foreign 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: 2019

1. Corporate ID No. 001256304

2. Name of Corporation Piramal Critical Care, Inc.

3. Street Address Principal Business Office:

No. and Street: 3950 SCHELDEN CIRCLE

City or Town: BETHLEHEM

State: PA

Zip: 18017

Country: USA

4. Business Phone No.

610-810-4538

5. State of Incorporation

State: DE

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

325412

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

PHARMACEUTICAL MANUFACTURER AND DISTRIBUTOR

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	MAHESH SANE	3950 SCHELDEN CIR BETHLEHEM, PA 18017 USA
SECRETARY	MAHESH SANE	3950 SCHELDEN CIR

		BETHLEHEM, PA 18017 USA
COO	MICHAEL LOGERFO	3950 SCHELDEN CIR BETHLEHEM, PA 18017 USA
DIRECTOR	VIVEK VALSARAJ	3950 SCHELDEN CIR BETHLEHEM, PA 18017 USA
DIRECTOR	MAHESH SANE	3950 SCHELDEN CIRCLE BETHLEHEM, PA 18017 USA
VICE PRESIDENT	MICHAEL TEAGUE	3950 SCHELDEN CIRCLE BETHLEHEM, PA 18017 USA
DIRECTOR	VIVEK SHARMA	3950 SCHELDEN CIRCLE BETHLEHEM, PA 18017 USA
DIRECTOR	PETER DEYOUNG	3950 SCHELDEN CIRCLE BETHLEHEM, PA 18017 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1,000.0000	10,000.00	10000

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 8 Day of February, 2019 at 12:25:27 PM. *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 MAHESH SANE
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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