

State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number <u>16711423</u>		2. Exact name of the Corporation <u>AUTOGENOMICS, INC.</u> <u>(541714)</u>			
3. Principal Office Address <u>1600 FARADAY AVENUE</u>			City <u>CARLSBAD</u>	State <u>CA</u>	Zip <u>92008</u>
4. Business Phone Number <u>760-447-2248</u>			5. State of Incorporation <u>DE</u>		
6. Brief description of the character of business conducted in Rhode Island <u>DNA TESTING</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name <u>Fareed Kureshy</u>			Vice-President Name		
Street Address <u>1600 Faraday Ave</u>			Street Address		
City <u>Carlsbad</u>	State <u>CA</u>	Zip <u>92008</u>	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued		Check the box to indicate an attachment <input checked="" type="checkbox"/> STMT 1	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
				COMMON	
				113955	
11. 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 statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative <u>Fareed Kureshy</u>					Date <u>2/7/14</u>
Signature of Authorized Representative <u>FAREED KURESHY</u>					

FILED

FEB 19 2019

BY 67367

MAIL TO:

Division of Business Services

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