



**State of Rhode Island  
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: February 1 - May 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:** 2023

**1. Corporate ID No.** 001724130

**2. Name of Corporation** Axion BioSystems, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 1819 PEACHTREE RD NE, SUITE 350  
SUITE 350

City or Town: ATLANTA

State: GA Zip: 30309 Country: USA

**4. Business Phone No.**

4044772557

**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.

334515

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

BIOTECHNOLOGY

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES ROSS	1819 PEACHTREE RD NE, SUITE 350 ATLANTA, GA 30309 USA
CEO	KEVIN GOULD	1819 PEACHTREE RD NE, SUITE 350 ATLANTA, GA 30309 USA
CFO	NICOLE MAYER	1819 PEACHTREE RD NE, STE 350 ATLANTA, GA 30309 USA
DIRECTOR	THOMAS O'BRIEN	1819 PEACHTREE RD NE, SUITE 350 ATLANTA, GA 30309 USA
DIRECTOR	ANNE JONES	1819 PEACHTREE RD NE, SUITE 350 ATLANTA, GA 30309 USA
DIRECTOR	GUS SALEM	1819 PEACHTREE RD NE, SUITE 350 ATLANTA, GA 30309 USA
DIRECTOR	CHRISTOPH WAER	1819 PEACHTREE RD NE, SUITE 350 ATLANTA, GA 30309 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		\$0.0001	100.00	100

**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 1 Day of February, 2023 at 10:57:24 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 PETER VIEBROCK

Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07