



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

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 RI DEPT. OF STATE
 BUS. SERVICES

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001705876	2. Exact name of the Corporation Boiron, Inc.
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3. Principal Office Address 4 Campus Boulevard	City Newtown Square	State PA	Zip 19073
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4. NAICS Code 325411	6. Brief description of the character of business conducted in Rhode Island receipt inspection, storage, repackaging and distribution of homeopathic drug products manufactured by our parent company.
5. State of Incorporation Pennsylvania	

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Janick Boudazin			Vice-President Name		
Street Address 4 Campus Boulevard			Street Address		
City Newton Square	State PA	Zip 19073	City	State	Zip
Secretary Name Jack A. Rosenbloom			Treasurer Name Janick Boudazin		
Street Address c/o Rosenbloom Law Group, LLC, 120 Gibraltar Road, Suite 111			Street Address 4 Campus Boulevard		
City Horsham	State PA	Zip 19044	City Newton Square	State PA	Zip 19073

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Valerie Poinot			Director Name Charles Deydier		
Street Address 2 Avenue de l'Oouest Lyonnais			Street Address 2 Avenue de l'Oouest Lyonnais		
City Messimy, France	State	Zip 69510	City Messimy, Frances	State	Zip 69510
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 type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	786	CWP	\$1.0

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 Janick Boudazin	Date 2-28-23
Signature of Authorized Representative	

FILED 1211
 MAR 01 2023
 BY 27872