Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503) 986-2200
FAX: (503) 378-4381
sos.oregon.gov/business

2023 ANNUAL REPORT

REGISTRY NUMBER: 202827697
DATE OF FILING: 10/14/2022
FEE: $275
DUE DATE: 10/14/2023
TYPE: FOREIGN BUSINESS CORPORATION

0578
DOC LAB, INC.
1915 NE STUCKI AVENUE
STE 400
HILLSBORO OR 97006

FILED: NOV 21, 2023
OREGON SECRETARY OF STATE
202827697-25523641
DOC LAB, INC.
RENANA

Business Name: DOC LAB, INC.

Jurisdiction: DELAWARE

The following information is required by statute. Please complete the information below. If any of the information is incorrect, you can make changes on this form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

REGISTERED AGENT:
ROEL CHAVEZ

STREET ADDRESS: (Must be an Oregon Physical Street Address)
1915 NE STUCKI AVENUE STE 400, HILLSBORO, OR 97006

If the Registered Agent has changed, the new Agent has consented to the appointment.

Type of Business: Medical lab consulting

Principal Place of Business Address:
(Physical Street Address)
1915 NE STUCKI AVENUE STE 400, HILLSBORO, OR 97006

Mailing Address:
1915 NE STUCKI AVENUE STE 400, HILLSBORO, OR 97006

President Name and Address
ROEL CHAVEZ
1915 NE STUCKI AVENUE STE 400, HILLSBORO, OR 97006

Secretary Name and Address
ROEL CHAVEZ
1915 NE STUCKI AVENUE STE 400, HILLSBORO, OR 97006

Execution: I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature [signature] **Printed Name** Roel Chavez

Date 9-1-23 **Phone Number** 971-570-4208

Make check payable to "Corporation Division" and mail completed form with payment to the address above.
Note: Filing fees may be paid with a major credit card. Submit the card number and expiration date on a separate page for your protection.