2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810705

Entity Name: BRISTOL-MYERS SQUIBB COMPANY

Current Principal Place of Business:

TAX DEPT - 3RD FLOOR 345 PARK AVE NEW YORK, NY 10154 FILED Apr 19, 2018 Secretary of State CC8631727412

Current Mailing Address:

TAX DEPT - 3RD FLOOR 345 PARK AVE NEW YORK, NY 10154 US

FEI Number: 22-0790350 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title CFO, EVP Title T

Name BANCROFT, CHARLES Name GALIK, JEFFREY

Address ROUTE 206 & PROVINCE LINE RD. Address ROUTE 206 & PROVINCE LINE RD.

City-State-Zip: PRINCETON NJ 08543 City-State-Zip: PRINCETON NJ 08543

Title GENERAL COUNSEL Title SVP

NameLEUNG, SANDRANameLEWBEL, GARYAddress345 PARK AVEAddress345 PARK AVENUECity-State-Zip:NEW YORK NY 10154City-State-Zip: NEW YORK NY 10154

Title DIRECTOR Title DIRECTOR

Name LACY, ALAN J Name STORCH, GERALD L

Address 345 PARK AVE Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154 City-State-Zip: NEW YORK NY 10154

Title DIRECTOR Title DIRECTOR

Name EMMENS, MATTHEW W Name GROBSTEIN, MICHAEL

Address TAX DEPT - 3RD FLOOR Address 345 PARK AVE

345 PARK AVE City-State-Zip: NEW YORK NY 10154

City-State-Zip: NEW YORK NY 10154

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY LEWBEL SR. VICE PRESIDENT 04/19/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name PALIWAL, DINESH C

Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154

Title DIRECTOR

Name BERTOLINI, ROBERT J

Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154

Title DIRECTOR

Name ARDUINI, PETER Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154

Title DIRECTOR

Name SAMUELS, THEODORE R

Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154

Title DIRECTOR

Name SATO, VICKI L PHD

Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154

Title DIRECTOR, CEO

Name CAFORIO, GIOVANNI

Address ROUTE 206 & PROVINCE LINE RD.

City-State-Zip: PRINCETON NJ 08543

Title SECRETARY

Name KELLY, KATHERINE R

Address 345 PARK AVE

City-State-Zip: NEW YORK NY 10154