

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P25366

**Entity Name:** BIO-RAD LABORATORIES, INC.

**Current Principal Place of Business:**

1000 ALFRED NOBEL DRIVE  
HERCULES , CA 94547

**Current Mailing Address:**

1000 ALFRED NOBEL DRIVE  
HERCULES , CA 94547 US

**FEI Number:** 94-1381833

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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            PRESIDENT, CEO AND DIRECTOR  
Name            SCHWARTZ, NORMAN  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

Title            TREASURER  
Name            HUTTON, RONALD  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

Title            DIRECTOR  
Name            DRAPEAU, LOUIS  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

Title            DIRECTOR  
Name            MALCHOINE, ROBERT  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

Title            DIRECTOR  
Name            MCCOMB, JOEL  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

Title            DIRECTOR  
Name            NEFF, DEBORAH  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

Title            DIRECTOR  
Name            SCHWARTZ, ALICE  
Address        1000 ALFRED NOBEL DRIVE  
City-State-Zip: HERCULES CA 94547

*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: RONALD HUTTON**

**TREASURER**

**04/04/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date