April 16, 2021,

To Our Valued Angel Investors,

2020 was a year like no other. When we started out, we were looking forward to a great year of accomplishment in the development of our AptaSure™ MRSA product. As you are aware, the COVID-19 pandemic has had an unprecedented effect on global health and our global economy. As a startup founder, we know you’re concerned on many fronts: concerned for the health of your families, and to the success of the company that you’ve worked so hard to contribute to.

We share your concerns deeply. We were well on track to achieving all the short-term targets we had set out in our strategy, and luckily maintained a portion of our committed project efforts despite the pandemic. As you may understand, the pandemic had placed a substantial burden on healthcare systems, as well as regulatory agencies. In fact, most of our work with the Food & Drug Administration (FDA) was delayed due to the FDA’s commitment to work with companies focused on the development of devices, vaccines, and products, related to COVID-19.

From March, 2020, through the end of December, 2020, each and every vendor in the medical device space had only one focus, this being a full-force, all hands-on-deck movement in the creation of COVID-19 testing devices. Every single lateral flow test strip manufacturer was only taking on new projects that related to COVID-1. Furthermore, all product suppliers of raw materials also jumped into the same band wagon, making their priority – pandemic centric.

The global pandemic also allowed for us to establish many new contacts within the medical device industry, as well as within the FDA. We collaborated with a company from Sweden, who was one of the first to offer a COVID-19 Rapid Antibody test. The company needed a way into the American Market, and they had been in the process of working for Emergency Use Authorization with the FDA. We offered to place the product on our website, which would in turn be a form of “free advertising “for Invenio Medical, Inc., all while gaining more attention from FDA. As you may understand, gaining credibility with the FDA is critical, especially when trying to promote other technologies.

For the next 3 months, we couldn’t even obtain a single nasal swab, as each manufacturer was producing swabs only to supply backorders for COVID-19 testing. Even the raw materials for lateral-flow-test-strips, including nitrocellulose paper, as well as the buffer/lysing agent was practically impossible to purchase unless the request was made by a large manufacturer. Buffer solutions were being created primarily for laboratory testing equipment, predominantly for PCR testing platforms, and limited to any other company that was not focused on COVID-19 only.

Nonetheless, with the obstacles encountered by the pandemic, we did actually accomplish other milestones that were of significant importance, as well as vital in the satisfaction process for our FDA documentation. Below is a list of some of our accomplishments from 2020.

* Lateral-flow-test strip tube/holder

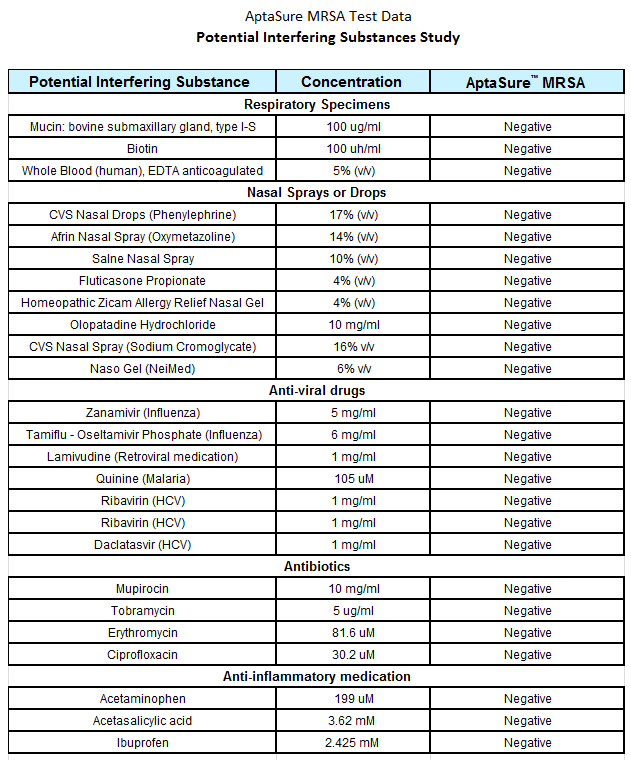
Our initial concerns involved the optical clarity of the AptaSure™ tube. As a reminder, we would need to ensure that the tube would allow for an accurate visual read of the test and control lines on the test strip.

Due to the initial opaque plastic tubing material, we had concern over missed-reads, or false negatives due to the end-user not being able to clearly visualize the line. This concern made us deliberate on whether or not we would need to create a “reader” device, which would allow for us to eliminate this risk of improper reading.

However, with numerous variations of plastic injection formulations, we reached a success in having achieved an optically clear tube made. This was a very big success, one which could have been very costly should this not have worked in our favor.

* We were able to concentrate our efforts on additional required testing requirements as defined by the FDA. This included the additional need to conduct “interference testing.” In other words, challenging our test by subjecting it to various competing strains of viruses, bacteria, as well as chemical substances. This testing alone has taken 5 continuous months of sample preparation, dilution, and confirmatory PCR testing. We are very fortunate to report that we had no interference with our MRSA test, when subjected to various interfering substances and pathogens.

This vital study information is provided herein:



|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sample** | | **Strain** | **Source / SpecimenType** | **Control Line** | **AptaSure MRSA** |
| 1.5 x 106TCID50/ml | Adenovirus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 7.5 x 106TCID50/ml | Adenovirus | Type 3 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 3 | AMMS/Inactivated viral culture | ++++ | Negative |
| 4.5 x 106TCID50/ml | Adenovirus | Type 5 | ATCC® - VR-5™ | +++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 5 | ATCC® - VR-5™ | ++++ | Negative |
| 1.0 x 106TCID50/ml | Adenovirus | Type 7 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 7 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106TCID50/ml | Adenovirus | Type 8 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 8 | AMMS/Inactivated viral culture | ++++ | Negative |
| 2.5 x 106TCID50/ml | Adenovirus | Type 11 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 11 | AMMS/Inactivated viral culture | +++ | Negative |
| 2.5 x 106TCID50/ml | Adenovirus | Type 18 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 18 | AMMS/Inactivated viral culture | ++++ | Negative |
| 6.0 x 106TCID50/ml | Adenovirus | Type 23 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 23 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Adenovirus | Type 55 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | Type 55 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | C1 Ad. 71 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | C1 Ad. 71 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | C1 Ad. 71 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | C1 Ad. 71 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Adenovirus | C1 Ad. 71 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Bordetella pertussis | 18323 | ATCC® - 9797D-5™ | ++++ | Negative |
| 1 x 106 PFU/ml | Bordetella pertussis | 18323 | ATCC® - 9797D-5™ | ++++ | Negative |
| 1 x 105 PFU/ml | Bordetella pertussis | H922 | ATCC® - BAA-2706™ | ++++ | Negative |
| 1 x 106 PFU/ml | Bordetella pertussis | H922 | ATCC® - BAA-2706™ | ++++ | Negative |
| 1 x 105 PFU/ml | Bordetella pertussis | CNCTC Hp 12/63 [623] | ATCC® - 51445™ | ++++ | Negative |
| 1 x 106 PFU/ml | Bordetella pertussis | CNCTC Hp 12/63 [623] | ATCC® - 51445™ | ++++ | Negative |
| 1 x 105 PFU/ml | *Candida albicans* | CBS 562 | ATCC® - 18804™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Candida albicans* | CBS 563 | ATCC® - 18804™ | ++++ | Negative |
| 7.88 x 108 CFU/ml | *Candida albicans* | CBS 564 | ATCC® - 18804™ | ++++ | Negative |
| 1 x 105 PFU/ml | *Candida albicans* | NIH 3172 | ATCC® - 14053D-5™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Candida albicans* | NIH 3173 | ATCC® - 14053D-5™ | +++ | Negative |
| 1 x 105 PFU/ml | *Candida albicans* | GDH16 | ATCC® - MYA273™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Candida albicans* | GDH16 | ATCC® - MYA273™ | ++++ | Negative |
| 1 x 105 PFU/ml | *Chlamydia pneumoniae* | A03 | ATCC® - VR-1452™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Chlamydia pneumoniae* | A03 | ATCC® - VR-1452™ | ++++ | Negative |
| 1 x 105 PFU/ml | *Chlamydia pneumoniae* | TW-183 | ATCC® - VR-2282™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Chlamydia pneumoniae* | TW-183 | ATCC® - VR-2282™ | ++++ | Negative |
| 1 x 105 PFU/ml | *Chlamydia pneumoniae* | J-21 | ATCC® - VR-1435™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Chlamydia pneumoniae* | J-22 | ATCC® - VR-1435™ | ++++ | Negative |
| 5 x 108 TCID50/ml (3.8 x 108 copies/ml) | Enterovirus Species A | Erdman | NCPV 0812215v | ++++ | Negative |
| 5.10 x 107 TCID50/ml (1.10 x 108 copies/ml) | Enterovirus Species B | Echovirus 6 | Zeptometrix 0810076CF | ++++ | Negative |
| 5 x 108 TCID50/ml (3.8 x 108 copies/ml) | Enterovirus Species C | Coxsackievirus A17 | ATCC® - VR-1023™ | ++++ | Negative |
| 1.58 x 106 TCID50/ml | Enterovirus Species D | 68 | Zeptometrix 0810237CF | ++++ | Negative |
| 1 x 105 PFU/ml | *Haemophilus influenzae* | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Haemophilus influenzae* | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Haemophilus influenzae* | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Human Metapneumovirus (hMPV) | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Human Metapneumovirus (hMPV) | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Human Metapneumovirus (hMPV) | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Human Metapneumovirus (hMPV) | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Human Metapneumovirus (hMPV) | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Human Metapneumovirus (hMPV) | N/A | AMMS/Inactivated viral culture | ++++ | Negative |
| 3.0 x 108TCID50/ml | Influenza A | H1N1 Denver | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza A | H1N1 Denver | AMMS/Inactivated viral culture | ++++ | Negative |
| 2 x 108TCID50/ml | Influenza A | H1N1 WS/33 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza A | H1N1 WS/34 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 108TCID50/ml | Influenza A | H1N1 A/Mal/302/54 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza A | H1N1 A/Mal/302/55 | AMMS/Inactivated viral culture | ++++ | Negative |
| 7.6 x 108TCID50/ml | Influenza A | H1N1 New Caledonia | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza A | H1N1 New Caledonia | AMMS/Inactivated viral culture | ++++ | Negative |
| 4.6 x 108TCID50/ml | Influenza A | H3N2 A/Hong Kong/8/68 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza A | H3N2 A/Hong Kong/8/69 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 108TCID50/ml | Influenza B | Nevada/03/201 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza B | Nevada/03/201 2 | AMMS/Inactivated viral culture | ++++ | Negative |
| 8.5 x 108TCID50/ml | Influenza B | B/Lee/40 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza B | B/Lee/41 | AMMS/Inactivated viral culture | ++++ | Negative |
| 4. x 108TCID50/ml | Influenza B | B/Taiwan/2/62 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Influenza B | B/Taiwan/2/63 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Legionella pneumophilia | Bloomington-2 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Legionella pneumophilia | Los-Angeles-1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Legionella pneumophilia | 82A3105 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycoplasma pneumoniae | Mutant 22 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycoplasma pneumoniae | FH strain of Eaton Agent [NCTC10119] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycoplasma pneumoniae | 36M129-B7 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycobacterium tuberculosis | K | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycobacterium tuberculosis | Erdman | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycobacterium tuberculosis | HN878 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Mycobacterium tuberculosis | CDC1551 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1x 105 PFU/ml | Mycobacterium tuberculosis | H37RV | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 1 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 2 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 2 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 2 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 3 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 4 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 5 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 3 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 3 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 3 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 4 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 5 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus | Type 6 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 4A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus | Type 4A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Parainfluenza virus 4A | Type 4A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus 4A | Type 4A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus 4A | Type 4A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Parainfluenza virus 4A | Type 4A | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Pneumocystis jirovecii | M167-6 | ATCC® - PRA-159™ | ++++ | Negative |
| 1 x 106 PFU/ml | Pneumocystis jirovecii | M167-6 | ATCC® - PRA-159™ | ++++ | Negative |
| 1 x 105 PFU/ml | Pneumocystis jirovecii | N/A | ATCC® - PRA-111™ | ++++ | Negative |
| 1 x 106 PFU/ml | Pneumocystis jirovecii | N/A | ATCC® - PRA-111™ | ++++ | Negative |
| N/A | Pooled human nasal wash | N/A | Pooled human nasal wash - AHMC Labs | ++++ | Negative |
| N/A | Pooled human nasal wash | N/A | Pooled human nasal wash - AHMC Labs | ++++ | Negative |
| 1.5 x 106TCID50/ml | Rhinovirus | A16 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Rhinovirus | A16 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1.5 x 106TCID50/ml | Rhinovirus | A16 | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Rhinovirus | A17 | AMMS/Inactivated viral culture | ++++ | Negative |
| 2 x 105 PFU/ml | Rhinovirus | A18 | AMMS/Inactivated viral culture | ++++ | Negative |
| 3 x 105 PFU/ml | Rhinovirus | A19 | AMMS/Inactivated viral culture | ++++ | Negative |
| 2.5 x106TCID50/ml | Respiratory syncytial virus (RSV) | RSVA | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Respiratory syncytial virus (RSV) | RSVA | AMMS/Inactivated viral culture | ++++ | Negative |
| 2.5 x106TCID50/ml | Respiratory syncytial virus (RSV) | RSVA | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Respiratory syncytial virus (RSV) | RSVA | AMMS/Inactivated viral culture | ++++ | Negative |
| 2.5 x106TCID50/ml | Respiratory syncytial virus (RSV) | RSVA | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | Respiratory syncytial virus (RSV) | RSVA | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus aureus* | NCTC 8532 | ATCC® - 12600™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus aureus* | NCTC 8532 | ATCC® - 12600™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus aureus* | FDA 209P | ATCC® - 6538P™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus aureus* | FDA 209P | ATCC® - 6538P™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus epidermidis* | 1191 | ATCC® - 700562™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus epidermidis* | 1191 | ATCC® - 700562™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus epidermidis* | RP12 [CIP 106510] | ATCC® - 35983™ | ++++ | Negative |
| 1 x 106 PFU/ml | *Staphylococcus epidermidis* | RP12 [CIP 106510] | ATCC® - 35983™ | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | Typing strain T1 [NCIB 11841, SF, 130] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | Typing strain T1 [NCIB 11841, SF, 130] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | Typing strain T1 [NCIB 11841, SF, 130] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | Typing strain T1 [NCIB 11841, SF, 130] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | Typing strain T1 [NCIB 11841, SF, 130] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | Typing strain T1 [NCIB 11841, SF, 130] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | 4752-98 [Maryland (D1)6B-17] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | 4752-98 [Maryland (D1)6B-17] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | 178 [Poland 23F-16] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | 179 [Poland 23F-16] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | 262 [CIP 104340] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | 263 [CIP 104340] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 105 PFU/ml | *Streptococcus pyogenes* | Slovakia 14-10 [29055] | AMMS/Inactivated viral culture | ++++ | Negative |
| 1 x 106 PFU/ml | *Streptococcus pyogenes* | Slovakia 14-10 [29055] | AMMS/Inactivated viral culture | ++++ | Negative |

* We have also worked on tested various control solutions. These positive and negative controls are required to be provided with the test kit. This would allow for the end-user to validate that the particular device is working properly. We have also been validating the controls in the context of our analytical and clinical studies (External control materials are considered particularly important when good manufacturing practice (GMP) requirements are waived and reagent stability studies are limited**).**

Financials:

No Loss for 2020. $7,277.36 income from commissions earned on passive internet sales of COVID-19 Rapid Antibody test.

Please see attached detailed reports for more information.

As our society unites to overcome the coronavirus outbreak, we hope this unity will serve as a promising model – a model for how we can come together to build a safer and more sustainable world for generations.

We, the undersigned, have a responsibility as partners, investors and mentors to stand by your side and support you during hard times. **We’re not going anywhere.**

Sincerely,

Victor R. Lange, PhD, JD

President/CEO, Invenio Medical, Inc.