OTC Pink Information & Disclosure Statement
For Quarterly Report Ending September 30, 2014

## NAME OF THE ISSUER AND PREDECESSORS (IF ANY)

Soft Landing Labs Ltd., an Illinois corporation ("us", "we" or "our" or the "Company") was originally formed on June 30, 2009.

## ADDRESS OF THE ISSUER'S PRINCIPAL EXECUTIVE OFFICES

### Location of Principal Executive Offices

Our principal executive offices are located at:
Soft Landing Labs Ltd.
747 North Church Rd., Ste. F4
Elmhurst, IL 60126
Tel: 630-758-0030
Fax: 630-758-0040

### Website

Our website is located at http://www.softlandinglabs2.com

### Investor Relations

Our Chief Executive Officer and founder, Dr. Abdel Fahmy, is responsible for its investor relations activity. We have not engaged an investor relations firm.

## SECURITY INFORMATION

### Authorized Capital

We are authorized to issue the following securities:

- 50,000,000 common shares, $.000001 par value per share which entitle the holder to one (1) vote per share; and
- 1,000 preferred shares which have been designated as "Series A Preferred Shares" which entitle the holder to 50,000 votes per share.

The holders of our common and preferred shares vote together as a single class.

### Class of Securities Outstanding

## Common

As of September 30, 2014, and February 9, 2015, we had 6,479,739 common shares outstanding.

As of September 30, 2014 and February 9, 2015, we had 6,279,739 common stock purchase warrants outstanding. Each warrant is exercisable into one (1) common share at the price of $1.50 at any time until March 31, 2015.

## Preferred Stock

We are authorized to issue 1,000 shares of Series A Preferred Stock, par value of $.001 per share (the "Preferred Stock"). On January 30, 2015, we issued 600 Series A Preferred Shares to Dr. Abdel Fahmy, our Chief Executive Officer and Director and 400 Series A Preferred Shares to Kareem Fahmy, our Chief Operating Officer and Director. Both before and after the issuance of the Series A Preferred Shares they had the ability to collectively determine the outcome of all matters submitted to our stockholders.

Each one (1) share of Series A Preferred Stock shall vote together with our common as a single class. Each one (1) share of Series A Preferred Stock is entitled to 50,000 votes per share on all matters submitted to a vote of our stockholders. As such, the 1,000 shares held by Dr. Abdel Fahmy and Kareem Fahmy provide them with 50,000,000 votes which enable them to determine the outcome of all matters submitted to a vote of our common stockholders.

The holders of the outstanding shares of Series A Preferred Stock are not entitled to receive dividends. The Series A Preferred Stock is not convertible. The shares are redeemable at the price of $1.00 per share upon the request of the holder. The preferred shares have a stated value of $1.00 per share.

## Shares Eligible For Resale

We presently have 6,479,739 common shares outstanding. Of these shares, 1,605,139 common shares are held by non-affiliates and 4,874,600 common shares are held by affiliates, which Rule 144 of the Securities Act of 1933 defines as restricted securities. 1,355,139 of our outstanding shares held by non-affiliates are eligible for resale under Rule 144 and 4,874,600 held by affiliates are available for resale in reliance upon Rule 144.

## CUSIP Number

Our CUSIP number is 83402F 106.

## Stock Ticker Symbol

Our trading symbol is SLNZ.

## Transfer Agent

Our transfer agent is VStock Transfer. Their contact information is:

VStock Transfer, LLC
18 Lafayette Place
Woodmere, NY 11598
Email: info@vstocktransfer.com
Telephone - 212-828-8436
http://www.VStockTransfer.com

VStock Transfer LLC is registered as a transfer agent with the Securities and Exchange Commission ("SEC") under the Securities Exchange Act of 1934, as amended.

### Restrictions on Securities

There are no restrictions on the transfer of our common shares other than those imposed under federal and state securities laws.

We presently have 6,479,739 common shares outstanding. Of these shares, 1,605,139 common shares are held by non-affiliates and 4,874,600 common shares are held by affiliates, which Rule 144 of the Securities Act of 1933 defines as restricted securities. 1,355,139 of our outstanding shares held by non-affiliates are eligible for resale under Rule 144 and 4,874,600 held by affiliates are available for resale in reliance upon Rule 144.

### Trading Suspensions

We have never been subject to a trading suspension order issued by the SEC.

### Stock Splits, Recapitalizations and Reorganizations

We have never effected a stock split, stock dividend, recapitalization, merger, acquisition, spin-off, or reorganization since its inception, and has no present plans to engaging in a stock split.

## ISSUANCE HISTORY

In the three years prior to this Offering, we offered and sold securities below. None of the issuances involved underwriters, underwriting discounts or commissions. We relied upon Sections 4(2) and Rule 506 of the Securities Act of 1933, as amended (the "Securities Act") for the offer and sale of the securities below. We believed these exemptions were available because:

- We are not a blank check company;
- We filed a Form D, Notice of Sales, with the SEC;
- Sales were not made by general solicitation or advertising;
- All certificates had restrictive legends;
- Sales were made to persons with a pre-existing relationship to our chief executive officer and sole director, Dr. Abdel Fahmy; and
- Sales were made to investors who represented that they were accredited investors.

In connection with the above transactions, although some of the investors may have also been accredited, we provided the following to all investors:

- Access to all our books and records;
- Access to all material contracts and documents relating to our operations; and
- The opportunity to obtain any additional information, to the extent we possessed such information, necessary to verify the accuracy of the information to which the investors were given access.

During March and April of 2011, we received an aggregate amount of $250,000 from 8 accredited investors who purchased convertible notes (the "Notes") in our note offering (the "Note Offering"). The funds invested in the Note Offering accrued interest at the rate of 10% per annum until such time as the Notes were converted into our common shares at the price of $0.33 per share. The terms of the Note Offering required mandatory conversion of all outstanding principal and interest at the price of $0.33 per share upon our receiving cumulative revenues of $1,000,000. Because we received revenues of $1,000,000, the Notes were converted into an aggregate of 838,339 common shares on March 31, 2013.

On December 11, 2012, we sold 100,000 common shares to Hamilton & Associates Law Group in exchange for legal services. Hamilton & Associates is controlled by Brenda Hamilton. We valued these shares at $0.50 per share.

On January 11, 2013, we issued 15,000 common shares to Matthew W. Van Ness who provided services as a chemist. We valued these shares at $0.33 per share.

On January 11, 2013, we issued 10,000 common shares to Kevin O'Brien, who provided services as a chemist. We valued these shares at $0.33 per share.

On January 11, 2013, we issued 10,000 common shares to Krysztof Wantuch, who provided sales and marketing services. We valued these shares at $0.33 per share.

On March 31, 2013, we issued 3,000 shares to Mohammed Kotb for services rendered to us. We valued these shares at $0.33 per share.

On March 31, 2013, we issued 10,000 shares to Alan Forfar for services rendered to us. We valued these shares at $0.33 per share.

On March 31, 2013, we issued 2,000 shares to Natalia Nekludoff for services rendered to us. We valued these shares at $0.33 per share.

On May 9, 2013, we sold 1,000 shares of our common stock to Kamila Orawiec at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 9, 2013, we sold 1,000 shares of our common stock to Karen Kehoe at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 9, 2013, we sold 1,000 shares of our common stock to Mansoura Atiq at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 10, 2013, we sold 1,000 shares of our common stock to Colleen Sujak at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 10, 2013, we sold 1,000 shares of our common stock to Brianna Sheahan at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares. Brianna Sheahan is the niece of Colleen Sujak.

On May 10, 2013, we sold 1,000 shares of our common stock to David Tews at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 13, 2013, we sold 1,000 shares of our common stock to Shannon Gibson at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 13, 2013, we sold 1,000 shares of our common stock to Edna Odallo at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares. On May 13, 2013, we sold 1,000 shares of our common stock to Victor Odallo at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On May 13, 2013, we sold 1,000 shares of our common stock to Linda Odallo at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares. Edna Odallo, Victor Odallo and Linda Odallo are siblings.

On May 13, 2013, we sold 200 shares of our common stock to each Richard Watson and Geraldine Watson at the price of $0.50 per share. Richard and Geraldine Watson are husband and wife and the parents of Jason A. Watson, a shareholder who provided services to us.

On May 13, 2013, we sold 1,000 shares of our common stock to Theresa Hein at the price of $0.50 per share or an aggregate price of $500 for 1,000 common shares.

On June 11, 2014, we issued 100,000 shares to Dr. Rizwana Mughal for services to be rendered over a one year term. We valued these shares at $0.50 per share.

On April 25, 2014, we issued 50,000 shares to Hamilton & Associates Law Group, P.A. for services rendered. We valued these shares at $0.50 per share.

On June 11, 2014, we issued 100,000 shares to Dr. John Gashkoff for services rendered to be rendered over a one year term. We valued these shares at $0.50 per share.

On January 30, 2015, we issued 600 shares of our Series A Preferred Stock to Dr. Abdel Fahmy, our Chief Executive Officer and Director for services rendered to us. Each one (1) share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Dr. Fahmy with 30,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 600 Series A Preferred Shares issued to Dr. Fahmy at $1.00 per share or an aggregate of $600.

On January 30, 2015, we issued 400 shares of our Series A Preferred Stock to Mr. Kareem Fahmy for services rendered to us. Each one (1) share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Mr. Fahmy with 20,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 400 Series A Preferred Shares issued to Mr. Fahmy at $1.00 per share or an aggregate of $400.

On October 23, 2013, we approved the issuance of 5,280,000 Common Stock purchase warrants to our employees and consultants to promote loyalty to us, as set forth in the chart in the chart below. We valued these warrants at $0.022 per share. As of February 9, 2014, no warrants have been exercised. Each one (1) warrant is exercisable by the holder at the price of $1.50 per share until March 31, 2015.

| Name | Number of Warrants Granted |
|---|---|
| Dr. Abdel Fahmy | 3,000,000 |
| Kareem Fahmy | 2,000,000 |
| Katherine Odallo | 25,000 |
| Ning Liu | 20,000 |
| Jillian O'Reiter | 20,000 |
| Jason A. Watson | 20,000 |
| Christopher Coor | 20,000 |
| Suzanne A. Hildebrant | 20,000 |
| Matthew W. Van Ness | 15,000 |
| Simrat Atwal | 10,000 |
| Colleen Sujak | 10,000 |

| | |
|---|---|
| Kevin O'Brien | 10,000 |
| Krysztof Wantuch | 10,000 |
| Hamilton & Associates Law Group P.A<br>Controlled by Brenda Hamilton | 100,000 |
| Total | 5,280,000 |

## FINANCIAL STATEMENTS

On February 9, 2015, we posted the financial statements for the 9 month period ending September 40, 2014, as required by the OTC Disclosure & News Service as a separate report and such financial statements are hereby incorporated by reference. These financial statements include the Company's balance sheet, statement of income, statement of cash flows, and financial statement notes.

## BUSINESS, PRODUCTS AND SERVICES

### Primary Standard Industry Code
Our primary Standard Industry Code ("SIC") is 8071 (Medical Laboratories).

### Fiscal Year End Date
Our fiscal year end is December 31.

### General
We were formed in the State of Illinois on June 30, 2009 by Dr. Abdel Fahmy to provide specialized laboratory and toxicology testing, including drug testing, using state of the art methodologies. Our customers are hospitals who pay us directly, drug treatment facilities, physician's offices and other medical laboratories for whom we provide laboratory testing services for their patient and bill the patient's insurance company.

Our principal executive office is located at 747 North Church Road, Suite F4, Elmhurst, IL 60126. Our telephone number is (630) 424-0030. Our website is www.softlandinglabs2.com.

For the year ended December 31, 2013, and December 31, 2012, we have a net income (loss) of $252,079 and ($13,238) respectively. For the nine month period ending September 30, 2014, we have net income (loss) of $269,655. For the year ended December 31, 2013 and December 31, 2012, we had revenues of $2,539,630 and $1,289,199 respectively. For the nine months ending September 30, 2014, we had revenues of $2,374,603.

### Our Operations
We provide clinical toxicology laboratory testing in Cook, DuPage, Kane, Lake, McHenry and Will Counties of Illinois for a wide variety of drug classes including: analgesic, antianxiety, anticholinergic, anticoagulant, anticonvulsant, antidepressant, antidiabetic, antihistamine, anti-inflammatory, antipsychotic, stimulant, decongestant, local anesthetic, muscle relaxant, narcotic analgesic and sedative medications. Our tests identify 80 different drugs and substances based on the patient's urine sample.

### Our Laboratory and Technology
Our facilities consist of a high complexity clinical toxicology reference laboratory. Our testing services are performed using immunoassay and liquid chromatography and tandem mass spectrometry. Immunoassay testing analyzes the binding of antibodies to antigens to identify and measure certain substances, high performance liquid chromatography and tandem mass

spectrometry. Chromatography is a technique for separating, identifying and quantifying the individual chemical components of substances based on the physical and chemical characteristics specific to each component. Mass spectrometry is a technique for analyzing the individual chemical components of substances by breaking molecules into multiple electrically charged ions that are then sorted for analysis according to their mass-to-charge ratios.

Based on our local presence, program management services and advanced instrumentation and technology, we are able to deliver our tests results within 1-2 days compared to a 3-4 day turn-around time of our competitors. Our accuracy of our tests are substances identified are summarized in the following chart:

| Drug or Substance | Technology Used | Accuracy of Test |
|---|---|---|
| Heroin metabolite | IA | 98% |
| Amphetamine | IA | 58% |
| Barbiturates | IA | 100% |
| Benzodiazepines | IA | N/A |
| Buprenorphine | IA | 98% |
| Cannabinoid | IA | 100% |
| Cocaine | IA | 99% |
| Ecstasy | IA | 100% |
| Methadone | IA | 98% |
| Opiates | IA | 94% |
| Oxycodone | IA | 97% |
| Phencyclidine | IA | 100% |
| Propoxyphene | IA | 92% |
| Creatinine | Jaffe Reaction | 99% |
| pH | Indicator Dyes | 99% |
| Morphine | LC/MS/MS | 99%+ |
| Oxymorphone | LC/MS/MS | 99%+ |
| Hydromorphone | LC/MS/MS | 99%+ |
| Codeine | LC/MS/MS | 99%+ |
| Oxycodone | LC/MS/MS | 99%+ |
| 6-AM | LC/MS/MS | 99%+ |
| Hydrocodone | LC/MS/MS | 99%+ |
| Tramadol | LC/MS/MS | 99%+ |
| Meperidine | LC/MS/MS | 99%+ |
| Norbuprenorphine | LC/MS/MS | 99%+ |
| Buprenorphine | LC/MS/MS | 99%+ |
| EDDP | LC/MS/MS | 99%+ |
| Methadone | LC/MS/MS | 99%+ |
| Diazepam | LC/MS/MS | 99%+ |
| Temazepam | LC/MS/MS | 99%+ |
| 7-Amino-clonazepam | LC/MS/MS | 99%+ |
| Chlordiazepoxide | LC/MS/MS | 99%+ |
| **Drug or Substance** | **Technology Used** | **Accuracy of Test** |
| Oxazepam | LC/MS/MS | 99%+ |
| Alpha-hydroxymidazolam | LC/MS/MS | 99%+ |
| Alpha-hydroxyalprazolam | LC/MS/MS | 99%+ |
| Nordiazepam | LC/MS/MS | 99%+ |
| Alprazolam | LC/MS/MS | 99%+ |
| 2-Hydroxyethylflurazepam | LC/MS/MS | 99%+ |
| Lorazepam | LC/MS/MS | 99%+ |
| Clonazepam | LC/MS/MS | 99%+ |
| Alpha-hydroxytriazolam | LC/MS/MS | 99%+ |
| Amphetamine | LC/MS/MS | 99%+ |
| MDA | LC/MS/MS | 99%+ |
| MDMA | LC/MS/MS | 99%+ |
| Methamphetamine | LC/MS/MS | 99%+ |
| Benzoylecgonine | LC/MS/MS | 99%+ |
| MDEA | LC/MS/MS | 99%+ |
| THC-COOH | LC/MS/MS | 99%+ |
| Zopiclone | LC/MS/MS | 99%+ |
| Zoplidem | LC/MS/MS | 99%+ |
| Meprobamate | LC/MS/MS | 99%+ |
| Zaleplon | LC/MS/MS | 99%+ |
| Carisoprodol | LC/MS/MS | 99%+ |
| Ritalinic acid | LC/MS/MS | 99%+ |
| Pregabalin | LC/MS/MS | 99%+ |
| Tapentadol | LC/MS/MS | 99%+ |
| Methylphenidate | LC/MS/MS | 99%+ |
| 6-beta-naltrexol | LC/MS/MS | 99%+ |
| Norpseudoephedrine | LC/MS/MS | 99%+ |
| Dextromethorphan | LC/MS/MS | 99%+ |
| Dextrorphan | LC/MS/MS | 99%+ |
| Mephedrone | LC/MS/MS | 99%+ |

| | | |
|---|---|---|
| MDPV | LC/MS/MS | 99%+ |
| Naphyrone | LC/MS/MS | 99%+ |
| Spice (JWH) | LC/MS/MS | 99%+ |
| BZP | LC/MS/MS | 99%+ |
| LSD | LC/MS/MS | 99%+ |
| Mitragynine | LC/MS/MS | 99%+ |
| Salvinorin | LC/MS/MS | 99%+ |
| Norketamine | LC/MS/MS | 99%+ |

| | | |
|---|---|---|
| Phenobarbital | LC/MS/MS | 99%+ |
| Butalbital | LC/MS/MS | 99%+ |
| Pentobarbital | LC/MS/MS | 99%+ |
| Secobarbital | LC/MS/MS | 99%+ |
| mCPP | LC/MS/MS | 99%+ |
| TFMPP | LC/MS/MS | 99%+ |
| Phencyclidine | LC/MS/MS | 99%+ |
| Propoxyphene | LC/MS/MS | 99%+ |

### Logistics, Data and Program Management Services

We support our laboratory analysis by providing logistics management, data management and program management to our customers which includes courier services for medical specimen transportation, management programs for laboratory-based, coordination of specimen collection sites, and data collection/reporting services and delivery of results through our internet-based reporting system.

We use information systems extensively in virtually all aspects of our business, including clinical testing, test reporting, billing, and management of medical data. We believe that our healthcare information technology systems help differentiate us favorably. We endeavor to establish systems that create value and efficiencies for our Company, patients and customers. The successful delivery of our services depends, in part, on the continued and uninterrupted performance of our information technology systems. We have taken precautionary measures to prevent problems that could affect our information technology systems.

We seek to continually improve the processes for collection, handling, storage and transportation of patient specimens, as well as the precision and accuracy of analysis and result reporting. Our quality assurance efforts focus on pre-analytic, analytic and post-analytic processes, including positive patient identification of specimens, report accuracy, proficiency testing, reference range relevance, process audits, statistical process control and personnel training for. We also focus on the licensing, credentialing, training and competence of our professional and technical staff. As part of our control procedures, we utilize internal proficiency testing, extensive quality control and rigorous process audits for our diagnostic information services.

We participate in external proficiency testing and have accreditation or licenses for our clinical laboratory operations from various regulatory agencies or accrediting organizations, such as the Centers for Medicare and Medicaid Services ("CMS") and the Commission on Office Laboratory Accreditation ("COLA"). Our laboratory participates in various external quality surveillance programs. They include, but are not limited to, proficiency testing programs administered by the College of American Pathologists ("CAP"), as well as The American College of Physicians. CAP is an independent, nongovernmental organization of board-certified pathologists approved by CMS to inspect clinical laboratories to determine compliance with the standards required by Clinical Laboratory Improvement Amendments ("CLIA"). CAP offers an accreditation program to which clinical laboratories may voluntarily subscribe. Accreditation by COLA includes on-site inspections and confirmation of participation in the CAP (or equivalent) proficiency testing program.

## Customers

Hospitals represented 4.3%, 10.2%, and 10.7% of our revenues during the years ending December 31, 2012 and 2013 and nine months ending September 30, 2014. Third party payors represented 65.6%, 76.3% and 88.4% of our revenues during the years ending December 31, 2012 and 2013 and nine months ending September 30, 2014. No other customer represented more than 10% of our revenues during the years ending December 31, 2012 and 2013, and nine months ending September 30, 2014, respectively.

Our remaining customers during such periods were a combination of drug treatment centers, physicians, laboratories and other offices with no customer representing more than 10% of revenues during the years ending December 31, 2012 and 2013, and the nine month period ending September 30, 2014, respectively.

## Payors

Other than testing we provide to hospitals, third party payors pay us for the testing services we provide. Depending on the billing arrangement and applicable law, the payor may be (1) a third party responsible for providing health insurance coverage to patients, such as a health insurance plan or the traditional Medicare or Medicaid program, or (2) the physician or other party (such as a hospital or another laboratory) who sends the testing to us.

Health plans typically negotiate directly or indirectly with our customers. Health plans, including managed care organizations and other health insurance providers, typically reimburse us as a contracted provider on behalf of their members for diagnostic information services performed. Reimbursement from our five largest health plans totaled less than 80%, and no one health plan accounted for more than 50% of our net revenues in the years ending December 31, 2012, December 31, 2013 and nine months ending September 30, 2014.

The trend of consolidation among health plans has continued. In some instances, health plans may delegate to independent physician associations or other alternative delivery systems (e.g., physician hospital organizations) the ability to negotiate for diagnostic information services on behalf of certain members.

Physicians, including both primary care physicians and specialists, laboratories and drug treatment facilities requiring toxicology and drug testing services for patients are referral sources for our services. They determine which laboratory to recommend or use based on a variety of factors, including: service; patient access and convenience, including participation in a health plan network; quality; price; and depth and breadth of test and service offering.

Hospitals generally maintain an on-site laboratory to perform the significant majority of clinical testing for their patients and refer less frequently needed and highly specialized procedures to outside service providers such as us. Hospitals using our services pay us directly. We typically charge the hospitals on a negotiated fee-for-service basis. Fee schedules for hospital reference testing services are sometimes negotiated on behalf of hospitals by group purchasing organizations. Continuing to obtain referrals from hospitals depends on our ability to provide higher quality of services than if the hospital's laboratory were to perform the services themselves.

## Billing

We generally bill for diagnostic information services on a fee-for-service basis under one of

two types of fee schedules. These fees may be negotiated or discounted. The types of fee schedules are:

- "Client" fees charged to our hospitals and customers for which are billed on a monthly basis.
- "Patient" fees charged to certain third-party payors on a claim-by-claim basis.

Billing for diagnostic information services is very complicated, and we maintain compliance policies and procedures for our billing. Patients, insurance companies, Medicare, Medicaid, physicians, drug treatment facilities and hospitals, all have different billing requirements. Some billing arrangements require us to bill multiple payors, and there are several other factors that complicate billing (e.g., disparity in coverage and information requirements among various payors; and incomplete or inaccurate billing information provided by ordering physicians). We incur additional costs as a result of our participation in Medicare and Medicaid programs because diagnostic testing services are subject to complex, stringent and frequently ambiguous federal and state laws and regulations, including those relating to coverage, billing and reimbursement. Changes in laws and regulations could further complicate our billing and increase our billing expense.

Deteriorating economic conditions may adversely impact our bad debt expense. In general, due to the potentially critical nature of our services, we perform the requested testing and report test results regardless of whether the billing information is correct or complete. We subsequently attempt to contact the healthcare provider or patient to obtain any missing information and to rectify incorrect billing information. Missing or incorrect information on requisitions complicates and slows down the billing process, creates backlogs of unbilled requisitions and generally increases the aging of accounts receivable and bad debt expense. The increased use of electronic ordering reduces the incidence of missing or incorrect information.

### Government Coverage and Reimbursements

Reimbursements from Government payors represent less than 10% of our laboratory testing revenue. Government payors, such as Medicare and Medicaid, have taken steps and can be expected to continue to take steps to control the cost, utilization and delivery of healthcare services, including clinical test services. With regard to the clinical toxicology testing services performed on behalf of Medicare beneficiaries, we must bill the Medicare program directly and must accept the carrier's fee schedule amount for covered services as payment in full. In addition, state Medicaid programs are prohibited from paying more (and in most instances, pay significantly less) than Medicare. Part B of the Medicare program contains fee schedule payment methodologies for clinical testing services performed for covered patients, including a national ceiling on the amount that carriers could pay under their local Medicare clinical testing fee schedules.

### Marketing and Sales

We employ a small direct sales force which consists of 1 full time and 2 part-time sales representatives. Our revenues to date have been generated by our sales force and through the contacts of our management within the medical community.

### Raw Materials

The raw materials required by the laboratory for urine drug testing consist primarily of two types: specimen collection supplies and reagents for laboratory analysis. The collection supplies include drug testing requisition forms and physician ordering forms. Collection supplies also consist of specimen bottles and shipping supplies. Reagents for drug testing are primarily immunoassay screening products and various chemicals used for confirmation testing. We believe all of these materials are available at competitive prices from numerous suppliers.

### Patents, Trademarks, Licensing and Other Proprietary Information

We believe that the basic technologies used to provide our toxicology and drug testing services are in the public domain and are not patentable. We rely upon trade secret protection of certain proprietary information such as our testing procedures rather than patents, where we believe disclosure could cause us to be vulnerable to competitors that could successfully replicate our techniques and processes.

### Seasonality

We believe that the laboratory testing business is subject to seasonal fluctuations because of a reduction of admissions for drug and alcohol treatment. These seasonal fluctuations include reduced volume in the year-end holiday periods and other major holidays. In addition, inclement weather may have a negative impact on volume thereby reducing our revenues and cash flow.

### Backlog

As of September 30, 2014 we did not have any significant backlog of orders. We do not believe that sales backlog is a significant factor in our business.

### Product and Professional Liability

Our laboratory testing services are primarily diagnostic and expose us to the risk of liability claims. Our laboratories have maintained continuous professional and general liability insurance since its inception. We carry general liability insurance in the amount of $1,000,000. The insurance policy covers those amounts we are legally obligated to pay for damages resulting from a medical incident, which arises out of a failure to render professional services. To date, we have not paid any material amounts for claims of this type and no material professional service claims are currently pending.

### Employees

As of December 31, 2013, and the nine months ending September 30, 2014, we had a total of 15 full-time employees and 4 part time employees as follows:

### Our full time employees are as follows:

- 6 Toxicology Chemists
- 3 Clinical Supervisors
- 3 Administrative and Clerical Staff
- 1 Accounting / Bookkeeping
- 1 Sales
- 4 Specimen Collectors

**Our part time employees are as follows:**

- 1 Administrative and Clerical Staff
- 1 Accounting / Bookkeeping

Our employees are not covered by any collective bargaining agreements and we have not experienced any work stoppages. We believe that we maintain good relations with our employees.

## Competition

We compete in a highly competitive, industry. We primarily compete with three types of clinical testing providers: commercial clinical laboratories, hospital-affiliated laboratories and physician-office laboratories. Our largest commercial clinical laboratory competitors are Quest Diagnostics and Laboratory Corporation of America Holdings, Inc. In addition, we compete with many smaller regional and local commercial clinical laboratories and specialized esoteric laboratories.

We complete primarily on the basis of test turn-around time, the reliability and accuracy of test results, price structure, service, transportation and collection network, and the ability to establish relationships with hospitals, physicians and users of drug abuse testing programs. Many of the segments competitors and potential competitors have substantially greater financial and other resources than we do.

The laboratory services drugs-of-abuse industry is consolidating. The consolidation is being driven by customers' desires to minimize the number of laboratories they work with, the need for operating efficiencies in the form of critical mass (testing volumes), required investment levels and government regulation. In light of these forces, we face an increasing challenge to differentiate ourselves through our technology and value-added services, such as turn-around time, diversity of testing services, collection site management, training and technical support and expertise. Our ability to successfully compete in the future will be based on our ability to maintain our quality and customer service, maintaining efficiencies and low cost operations and developing new testing services.

## Regulation

We are subject to or impacted by extensive and frequently changing laws and regulations at both the federal and state levels. These laws and regulations include regulations particular to our business, and laws and regulations relating to conducting business generally. We cannot predict whether future changes in governmental regulations might significantly increase compliance costs or adversely affect the time or cost required to develop and introduce new clinical testing services. We are subject to inspections and audits by governmental agencies. Set forth below are highlights of the key regulatory schemes applicable to our businesses.

These agencies have the authority to take various administrative and legal actions against us for non-compliance, such as fines, product suspensions, submission of warning letters, recalls, product seizures, injunctions and other civil and criminal sanctions, any of which could have an adverse effect on our financial condition.

## Centers for Medicare and Medicaid Services ("CMS")

The Clinical Laboratory Improvement Act ("CLIA"), introduced in 1992, requires that all in-vitro diagnostic products be categorized as to level of complexity. The complexity category to which a clinical laboratory test system is assigned may limit the number of laboratories qualified to use the test system, thus impacting product sales. We are licensed as a high complexity laboratory and are accredited by the COLA Laboratory Accreditation Program.

### Health Insurance Portability and Accountability Act ("HIPAA")

We are committed to safeguarding the privacy and confidentiality of our patients' protected health information. Our policy is to be in compliance with the requirements of federal and Illinois state law related to protecting the privacy of health information, including the Standards for Privacy of Individually Identifiable Health Information (45 CFR, Parts 160 and 164 - commonly called the "HIPAA Final Privacy Rule"). We comply with out-of-state regulations as applicable. We have compiled several policies and procedures that outline the steps that are taken to ensure compliance with the HIPAA privacy standards and Illinois state laws related to protected health information. All employees receive appropriate training on these policies and procedures, and it is the responsibility of each individual to follow the policies and procedures in the performance of their jobs.

### CLIA and State Clinical Laboratory Licensing

All of our laboratories and, where applicable, patient service centers, are licensed and accredited as required by the appropriate federal and state agencies. Clinical Laboratory Improvement Amendments regulate virtually all clinical laboratories by requiring that they be certified by the federal government and comply with various technical, operational, personnel and quality requirements intended to ensure that the services provided are accurate, reliable and timely.

### Fraud and Abuse

Federal anti-kickback laws and regulations prohibit making payments or furnishing other benefits to influence the referral of tests billed to Medicare, Medicaid or certain other federal or state healthcare programs. The penalties for violation of these laws and regulations may include monetary fines, criminal and civil penalties and/or suspension or exclusion from participation in Medicare, Medicaid and other federal healthcare programs. Several states have similar laws.

In addition, federal and state anti-self-referral laws generally prohibit Medicare and Medicaid payments for clinical tests referred by physicians who have a personal investment in, or a compensation arrangement with, the testing laboratory. Some states also have similar laws that are not limited to Medicare and Medicaid referrals and could also affect investment and compensation arrangements with physicians.

Additionally the State of Illinois has its own anti-kickback laws and anti-self-referral laws which mostly pertain to private insurances.

### Food and Drug Administration

The FDA has regulatory responsibility over, among other areas, instruments, testing kits, reagents and other devices used by clinical laboratories to perform diagnostic testing in the United States. Certain instrumentation used for drug testing must be cleared by the FDA prior to being used by our laboratory. The companies which manufacture these products has to obtain such FDA clearance before we purchase the products from them.

Tests that are performed by instruments which have not received FDA clearance require certain process of validation, calibration, quality control as well as proficiency testing. FDA has been discussing possibly regulating laboratory developed tests but a decision has not yet been finalized in regards to drug testing products. The FDA has announced several regulatory and guidance initiatives that may impact the clinical laboratory testing business, including by increasing regulation of Laboratory Developed Tests and analyte specific reagents. If finalized, these initiatives could have a significant impact on our business. The regulatory approach adopted by the FDA may lead to an increased regulatory burden on us. The approach may hinder our ability to develop and market new services, cause an increase in the cost of our services, delay our ability to introduce new tests or hinder our ability to perform testing. The approach also may result in increased product cost, a delay in obtaining needed supplies, or, if a manufacturer withdraws its products from the market, an inability to obtain needed supplies. These matters could have a material adverse effect on our business and our financial condition, results of operations and cash flows.

### Environmental, Health and Safety

Our laboratory receives and uses small quantities of hazardous chemicals in its operations and is licensed to handle and dispose of such chemicals and materials. We comply with all federal, state and local regulations regarding the safe handling, storage and disposal of such chemicals and materials. Employees working with chemicals are trained initially regarding safe practices, procedures and policies and also participate in annual safety reviews. Periodic inspections by laboratory accrediting agencies and local authorities assure adherence to safe practices and compliance with applicable regulations.

We are subject to laws and regulations related to the protection of the environment, the health and safety of employees and the handling, transportation and disposal of medical specimens, infectious and hazardous waste and radioactive materials. For purposes of transportation, some biological materials and laboratory supplies are classified as hazardous materials and are subject to regulation by one or more of the following agencies: the U.S. Department of Transportation, the U.S. Public Health Service, the United States Postal Service and the International Air Transport Association. We generally use third-party vendors to dispose of regulated medical waste, hazardous waste and radioactive materials and contractually require them to comply with applicable laws and regulations.

### Privacy and Security of Health and Personal Information

We are required to comply with laws and regulations in the United States (at the federal and state levels) regarding protecting the security and privacy of certain healthcare and personal information. These privacy and security laws include the federal Health Insurance Portability and Accountability Act, as amended, and the regulations thereunder (collectively, "HIPAA"). The HIPAA security regulations establish requirements for safeguarding protected health information. The HIPAA privacy regulations establish comprehensive federal standards regarding the uses and disclosures of protected health information. Together, these laws and regulations establish a complex regulatory framework on a variety of subjects, provide for penalties for non-compliance, and may require a healthcare provider to notify individuals or the government if the provider discovers certain breaches of unsecured personal or a patient's protected health information. The regulations were revised in early 2013. We have maintained policies and practices designed to meet applicable requirements, and plan to update them to address the new regulations.

## Compliance

We seek to conduct our business in compliance with all applicable laws and regulations. Many of the laws and regulations applicable to us, however, including many of those relating to billing, reimbursement of tests and relationships with physicians and hospitals, are vague or indefinite or have not been interpreted by the courts. They may be interpreted or applied by a prosecutorial, regulatory or judicial authority in a manner that could require us to make changes in our operations, including our pricing and/or billing practices. The applicability or interpretation of laws and regulations also may not be clear in light of emerging changes in clinical testing science and healthcare technology. Such occurrences, regardless of their outcome, could, among other things:

- increase our operating costs including, but not limited to, those costs associated with providing our clinical testing information services and administrative requirements related to billing;
- decrease the amount of reimbursement related to our services;
- damage our reputation; and/or
- adversely affect important business relationships with our customers and third party payors.

If we fail to comply with applicable laws and regulations, we could suffer civil and criminal penalties, fines, exclusion from participation in governmental healthcare programs and the loss of various licenses, certificates and authorizations necessary to operate our business, as well as incur additional liabilities from third party claims, all of which could have a material adverse effect on our business. Certain federal and state statutes, regulations and other laws, including the qui tam provisions of the federal False Claims Act, allow private individuals to bring lawsuits against healthcare companies on behalf of government payors, private payors and/or patients alleging inappropriate billing practices.

The federal or state governments may bring claims based on theories as to our current practices that we believe are lawful. The federal and state governments have substantial leverage in negotiating settlements since the amount of potential damages far exceeds the rates at which we are reimbursed, and the government has the remedy of excluding a non-compliant provider from participation in the Medicare and Medicaid programs. Reimbursement from traditional government programs like Medicare and Medicaid programs represented less than 10% of our net revenues during the year ending December 31 2013, and nine months ending September 30, 2014. We believe that, based on our experience with settlements and public announcements by various government officials, the federal and state governments continue to strengthen their enforcement efforts against healthcare fraud. In addition, legislative provisions relating to healthcare fraud and abuse provide government enforcement personnel substantially increased funding, powers, penalties and remedies to pursue suspected cases of fraud and abuse.

We regularly conduct in-depth reviews of procedures and facilities to assure regulatory compliance throughout our operations. We conduct annual training of our employees on these compliance policies and procedures.

## Risk Factors

*You should carefully consider the risks described below together with all of the other information included in this report before making an investment decision with regard to our securities. The statements contained in or incorporated herein that are not historic facts are forward looking statements that are* subject *to risks and uncertainties that could cause actual results to differ materially from those set forth in or implied by forward looking statements. If any of the following risks actually occurs, our business, financial condition or results of operations could be harmed. In that case, you may lose all or part of your investment.*

## Risks Related to Our Financial Condition

### Expenses required to operate as a public company will reduce funds available to develop our business and could negatively affect our stock price and adversely affect our results of operations, cash flow and financial condition.

Operating as a public company is more expensive than operating as a private company, including additional funds required to obtain outside assistance from legal, accounting, investor relations, or other professionals that could be more costly than planned. We may also be required to hire additional staff to comply with additional SEC reporting requirements. We anticipate that the cost of SEC reporting will be approximately $60,000 annually. Our failure to comply with reporting requirements and other provisions of securities laws could negatively affect our stock price and adversely affect our results of operations, cash flow and financial condition. If we fail to meet these requirements, we will be unable to secure a qualification for quotation of our securities on the OTC Markets OTC Link, or, if we have secured a qualification, we may lose the qualification and our securities would no longer trade on the OTC Markets OTC Link. Further, if we fail to meet these obligations and consequently fail to satisfy our SEC reporting obligations, investors will then own stock in a company that does not provide the disclosure available in quarterly, annual reports and other required SEC reports that would be otherwise publicly available leading to increased difficulty in selling their stock due to our becoming a non-reporting issuer.

## Risks Related to Our Business

### The clinical laboratory services industry is highly competitive.

We compete in a fragmented and highly competitive industry. Our major competitors include Quest Diagnostics Incorporated, Laboratory Corporation of America Holdings as well as the testing units of other clinical laboratories, including independent laboratories, specialized laboratories, and in-house testing facilities maintained by hospitals. Many of our competitors have substantially greater financial and other resources than we do. The laboratory toxicology and drug testing industry is consolidating. The consolidation is being driven by the larger laboratories whose greater resources enable them to be more responsive and better able to increase operating efficiencies in the form of critical mass (testing volumes) and required investment levels. In light of these forces, we face an increasing challenge to differentiate ourselves through our technology and value-added services, such as data management, collection site management, training and technical support and expertise. If we are unsuccessful in these differentiation efforts, we may experience declining revenues and gross margins, and reduced cash flows.

### If reimbursement for our services by third party payors is reduced, our net revenues could diminish.

Third party payors, including state payors and Medicare, are challenging the prices charged for medical services including clinical laboratory testing. Third party payors may limit both coverage and the level of reimbursement for our services. A portion of the testing for which we bill our hospital and laboratory clients is ultimately paid by third party payors. Any pricing pressure exerted by these third party payors on our customers may, in turn, be exerted by our customers on us. If government and other third party payors do not provide adequate coverage and reimbursement for our services, our net revenues could decline. If we cannot offset additional reductions in the payments we receive for our services by reducing costs, increasing test volume and/or introducing new procedures, our net revenues and profitability could decline. Health care reform changes in government reimbursement could also reduce our net revenues.

**A significant increase in the billings we have outstanding could increase bad debt expense and have an adverse effect on our business.**

Our revenues are billed to our hospital customers, patients and third-party payors, including insurance companies and Medicaid and Medicare agencies. The increase is a result of growth in our clinical laboratory. Billing to third party payors is complex and is subject to extensive and non-uniform rules and administrative requirements. It is subject to risks including delayed reimbursement, difficulties in gathering complete and accurate billing information, inabilities to collect and long collection cycles. Failure to timely or correctly bill may lead to our not being reimbursed for our services or an increase in the aging of our accounts receivable, which could adversely affect our results of operations and cash flows. In addition, we are experiencing more billing to patients. Patient billing is increasing as a result of the growth in patient copayments, coinsurance and deductibles and an increase in high deductible health plans. Patient billings are subject to the risk of difficulties in gathering accurate billing information, inabilities to collect and long collection cycles which also could adversely affect our results of operations and cash flows. We believe our allowance for contractuals and doubtful accounts is adequate. However, we cannot assure that our ongoing assessment of accounts receivable will not result in the need for additional provisions, which would adversely affect our results of operations and cash flows.

**We could face significant monetary damages and penalties and/or exclusion from the Medicare and Medicaid programs if we violate health care anti-fraud and abuse laws.**

We are subject to extensive government regulation at the federal, state and local levels. Our failure to meet governmental requirements under these regulations, including those relating to billing practices and relationships with physicians and hospitals, could lead to civil and criminal penalties, exclusion from participation in Medicare and Medicaid and possible prohibitions or restrictions on the use of our laboratory. While we believe that we conduct our operations and relationships with care in an effort to meet all statutory and regulatory requirements, there is a risk that government authorities might take a contrary position. Such occurrences, regardless of their outcome, could damage our reputation and adversely affect important business relationships we have with third parties.

**Failure to maintain the security of customer-related information could damage our reputation with customers and cause us to incur substantial additional costs and become subject to litigation.**

We receive certain personal information about our customers. In addition, we depend upon the secure transmission of confidential information over public networks, including information permitting cashless payments. A compromise in our security systems that results in customer

personal information being obtained by unauthorized persons could adversely affect our reputation with our customers and others, as well as our results of operations, financial condition and liquidity. It could also result in litigation against us or the imposition of penalties.

**If we fail to keep up with technological advancements and fail to develop our testing services, we may be at a competitive disadvantage and our testing services may become less attractive or obsolete.**

The continuing changes in modern biotechnology could render our services as unmarketable or obsolete. These changes come in the form of technological innovation, changes in customer requirements, declining prices and evolving industry requirements. Historically, our product and service obsolescence has not had a material impact on our profitability. New services, as well as new technology, may render existing technology services obsolete, or too costly and unmarketable. If we do not commit the resources necessary to develop and sell testing services incorporating new technologies as demanded by our markets, our services may be rendered obsolete, impacting our revenues and profitability. Even with the development of new technologically advanced services, we cannot assure you that they will gain market acceptance. Lack of market acceptance for any of our services could reduce our revenues and negatively affect our profitability.

**Our business is subject to stringent laws and regulations and if we are unable to comply, our business may be significantly harmed.**

Our testing services are subject to the regulations of a number of governmental agencies as listed in "Business" under the heading "Regulation". We cannot predict whether future changes in governmental regulations might significantly increase compliance costs or adversely affect the time or cost required to develop and introduce new services. If we do not comply with existing or additional laws or regulations, or if we incur penalties and fines, it could increase our expenses, prevent us from increasing net revenues, or hinder our ability to conduct our business.

**We may be exposed to liability claims.**

We are exposed to the risk of liability claims from our testing services and other aspects of our business. We currently maintain insurance to cover professional and general liability claims. In the past, all professional and general liability claims have been covered under our insurance policy. However, in the future, we may be faced with litigation claims which exceed our insurance coverage or are not covered under our insurance policy, which could have a significant impact on our results of operations and financial condition.

**We may have liability for claims not covered by our insurance policies.**

We face financial exposure to product liability claims if the use of our testing services results in an improper diagnosis. We maintain liability insurance in the amount of $1,000,000 per occurrence. Potential product liability claims may exceed the amount of our insurance coverage or may be excluded from coverage under the terms of our insurance policy. We currently maintain insurance to cover such product liability claims. To the extent any such claim is uncovered or our insurance coverage is inadequate, we could be required to pay any and all costs associated with such claim, the cost of defense whatever the outcome of the action, and possible settlement or damages if a court rendered a judgment in favor of any plaintiff asserting such claim against us. Damages assessed in connection with, and the costs of defending, any legal action could be substantial. Damages may include punitive damages,

which may substantially exceed actual damages. The obligation to pay such damages could exceed our ability to pay such damages, which could have a significant impact on our results of operations and financial condition.

**If our tests and business processes infringe on the intellectual property rights of others, we could be forced to engage in costly litigation, pay substantial damages or be prohibited from providing our services.**

Other companies or individuals, including our competitors, may obtain patents or other property rights that would prevent, limit or interfere with our ability to develop, perform or provide our testing services. As a result, we may be involved in intellectual property litigation and we may be found to infringe on the proprietary rights of others, which could force us to do one or more of the following:

- cease developing, performing our testing services that incorporate the challenged intellectual property;
- change our business processes; or
- pay substantial damages, court costs and attorneys' fees, including potentially increased damages for any infringement held to be willful.

Infringement and other intellectual property claims, regardless of their merit, can be expensive and time consuming to litigate. In addition, any requirement to reengineer our business processes could substantially increase our costs, force us to interrupt product sales or delay new test releases. In the past, we have not been subject to a dispute regarding infringement of intellectual property of third parties.

**Adverse results in material litigation matters could have a material adverse effect upon our business.**

We may become subject in the ordinary course of business to material legal action related to, among other things, professional liability and employee-related matters, as well as inquiries from governmental agencies and Medicare or Medicaid carriers regarding billing issues. Legal actions could result in substantial monetary damages as well as damage to our reputation with customers, which could have a material adverse effect upon our business.

**We must be able to adapt to rapidly changing technology trends and evolving industry standards or we risk our services becoming obsolete.**

The specialized laboratory testing market in which we compete is characterized by intensive development efforts and rapidly advancing technology. Our future success will depend, in large part, upon our ability to anticipate and keep pace with advancing technology and competing innovations. We may not be successful in identifying, developing and marketing new services or enhancing our existing services.

**Adverse publicity of our specialized laboratory testing services could harm our reputation and adversely affect our revenues.**

We believe we are highly dependent upon positive consumer perceptions of the reliability of our specialized laboratory testing as well as similar testing services distributed by other companies. Consumer perception of the reliability of specialized laboratory testing can be substantially influenced by scientific research or findings, national media attention and other publicity about the use of our services. Adverse publicity from these sources regarding the reliability, quality or efficacy of our testing services could harm our reputation and results of

operations. The mere publication of news articles or reports asserting that specialized laboratory testing is not reliable for the purposes intended could have a material adverse effect on our business, financial condition and results of operations, regardless of whether such news articles or reports are scientifically supported.

**We rely on intellectual property, which we may not be able to protect fully or effectively.**
We rely on trade secret rights, employee confidentiality agreements and non-disclosure agreements in order to develop and protect our proprietary technology and information. Notwithstanding our efforts to protect our proprietary rights, existing trade secret, copyright, and trademark laws afford only limited protection. Despite our efforts to protect our proprietary rights and other intellectual property, unauthorized parties may attempt to copy certain aspects of our testing services, obtain and use information that we regard as proprietary or misappropriate our trademarks, trade names and similar proprietary rights. Our means of protecting our proprietary rights may not be adequate. In addition, our competitors might independently develop similar technology or duplicate our testing procedures and other intellectual property rights.

## Risks Related To Our Management

**Should we lose the services of our management, our financial condition may be negatively impacted.**
Our future depends on the continued contributions of Dr. Abdel Fahmy, our chief executive officer and director and Kareem Fahmy, our chief operating officer and director, who would each be difficult to replace. Their services are critical to the management of our business and operations. We do not maintain key man life insurance on any of our officers or directors. Should we lose the services of any of our officers and directors, we may be unable to replace their services with equally competent and experienced personnel, our operational goals and strategies may be adversely affected, which will negatively affect our potential revenues.

**Because our management consists of family relationships and our management has outside business interests, there may be conflicts of interests that may not be resolved in our favor.**
Our chief executive officer and director, Dr. Abdel Fahmy is the brother of our chief operating officer and director, Kareem Fahmy. Their family relationships in the conduct of our business may come into conflict with our interests and those of our minority stockholders. You should carefully consider these potential conflicts of interest before deciding whether to invest in our common stock shares. We have not yet adopted a policy for resolving these conflicts of interests.

Dr. Fahmy and Kareem Fahmy dedicate fulltime to our business. Our chief executive officer, Dr. Abdel Fahmy founded and is the executive director of Soft Landing Interventions Ltd., and addiction treatment medical practice.

Accordingly, the personal interests of our chief executive officer may come into conflict with our interests and those of our minority stockholders. We may present Dr. Fahmy with business opportunities, which are simultaneously desired. Additionally, we may compete for time, investment capital, technical resources, key personnel, management time and other things in the future. You should carefully consider these potential conflicts of interest before deciding whether to invest in our shares of our common stock. We have not yet adopted a policy for

resolving such conflicts of interests.

**Our officers and directors have no experience managing a public company which is required to establish and maintain disclosure controls and procedures and internal control over financial reporting.**

We have never operated as a public company and our management has no experience managing a public company which is required to establish and maintain disclosure controls and procedures and internal control over financial reporting. As a result, we may not be able to operate successfully as a public company, even if our operations are successful. We plan to comply with all of the various rules and regulations, which are required for a public company that is reporting company with the SEC. However, if we cannot operate successfully as a public company, your investment may be materially adversely affected.

**We will incur additional costs and management time related expenses pertaining to SEC reporting obligations and SEC compliance matter and our management has no experience in such matters.**

Our management is responsible for managing us, including compliance with SEC reporting obligations and maintaining disclosure controls and procedures and internal control over financial reporting. These public reporting requirements and controls are new to these individuals and at times will require us to obtain outside assistance from legal, accounting or other professionals that will increase our costs of doing business. Should we fail to comply with SEC reporting and internal controls and procedures, we may be subject to securities law violations that may result in additional compliance costs or costs associated with SEC judgments or fines, each of which would increase our costs and negatively affect our potential profitability and our ability to conduct our business.

**Because we do not have an audit or compensation committee, shareholders will be required to rely on the members of our board of directors, who are not independent, to perform these functions.**

We do not have an audit or compensation committee or board of directors as a whole that is composed of independent directors. Because our directors are also our officers and controlling shareholders, they are not independent. There is a potential conflict between their or our interests and our shareholders' interests, since our directors are also our officers who will participate in discussions concerning management compensation and audit issues that may affect management decisions. Until we have an audit committee or independent directors, there may be less oversight of management decisions and activities and little ability for minority shareholders to challenge or reverse those activities and decisions, even if they are not in the best interests of minority shareholders.

**We are an "emerging growth company," and we cannot be certain if the reduced reporting requirements applicable to emerging growth companies will make our common stock less attractive to investors.**

We are an "emerging growth company," as defined in the JOBS Act. For as long as we continue to be an emerging growth company, we may take advantage of exemptions from various reporting requirements that are applicable to other public companies that are not emerging growth companies, including not being required to comply with the auditor attestation requirements of Section 404 of the Sarbanes-Oxley Act, reduced disclosure obligations regarding executive compensation in our periodic reports and proxy statements and exemptions from the requirements of holding a nonbinding advisory vote on executive

compensation and shareholder approval of any golden parachute payments not previously approved. We could be an emerging growth company for up to five years, although we could lose that status sooner if our revenues exceed $1,000,000,000, if we issue more than $1,000,000,000 in non-convertible debt in a three year period, or if the market value of our common stock held by non-affiliates exceeds $100,000,000 as of any April 30 before that time, in which case we would no longer be an emerging growth company as of the following April 30. We cannot predict whether investors will find our common stock less attractive because we may rely on these exemptions. If some investors find our common stock less attractive as a result, there may be a less active trading market for our common stock and our stock price may be more volatile.

We have elected to use the extended transition period for complying with new or revised accounting standards under Section 102(b)(2) of the JOBS Act, that allows us to delay the adoption of new or revised accounting standards that have different effective dates for public and private companies until those standards apply to private companies. As a result of this election, our financial statements may not be comparable to companies that comply with public company effective dates.

## Risks Related to Our Common Stock

### Our officers and directors have voting control over all matters submitted to a vote of our common stockholders, which will prevent our minority shareholders from having the ability to control any of our corporate actions.

As of February 9, 2015, we had 6,479,739 shares of common stock outstanding, each entitled to one vote per common share, and 1,000 shares of preferred stock, each entitled to 50,000 votes per share. Our chief executive officer and director, Dr. Abdel Fahmy, controls 2,937,300 common shares and 600 preferred shares. Kareem Fahmy, our chief operating officer and director, controls 1,937,300 common shares and 400 preferred shares. As such, the aggregate number of common shares controlled by our management effectively entitles them to vote approximately 89% of our outstanding common shares on all matters submitted to a vote of our common stockholders. As a result, our management has the ability to determine the outcome of all matters submitted to our stockholders for approval, including the election of directors. Our management's control of our voting securities may make it impossible to complete some corporate transactions without its support and may prevent a change in our control. In addition, this ownership could discourage the acquisition of our common stock by potential investors and could have an anti-takeover effect, possibly depressing the trading price of our common stock.

### We are subject to penny stock regulations and restrictions and you may have difficulty selling shares of our common stock.

The SEC has adopted regulations which generally define so-called "penny stocks" to be an equity security that has a market price of less than $5.00 per share or an exercise price of less than $5.00 per share, subject to certain exemptions. Our common stock is a "penny stock", and we are subject to Rule 15g-9 under the Exchange Act, or the "Penny Stock Rule". This rule imposes additional sales practice requirements on broker-dealers that sell such securities to persons other than established customers. For transactions covered by Rule 15g-9, a broker-dealer must make a special suitability determination for the purchaser and have received the purchaser's written consent to the transaction prior to sale. As a result, this rule may affect the ability of broker-dealers to sell our common shares and may affect the ability of purchasers to

sell any of our common shares in the secondary market.

For any transaction (other than an exempt transaction) involving a penny stock, the rules require delivery, prior to such transaction, of a disclosure schedule prepared by the SEC relating to the penny stock market. Disclosure is also required to be made regarding sales commissions payable to both the broker-dealer and the registered representative, and current quotations for the securities. Finally, monthly statements are required to be sent disclosing recent price information for the penny stock held in the account and information on the limited market in penny stock.

Our common stock does not qualify for exemption from the Penny Stock Rule. In any event, even if our common stock is exempt from the Penny Stock Rule in the future, we would remain subject to Section 15(b)(6) of the Exchange Act, which gives the SEC the authority to restrict any person from participating in a distribution of penny stock, if the SEC finds that such a restriction would be in the public interest.

**Sales of our common stock under Rule 144 could reduce the price of our stock.**

We presently have 6,479,739 common shares outstanding. Of these shares, 1,605,139 common shares are held by non-affiliates and 4,874,600 common shares are held by affiliates, which Rule 144 of the Securities Act of 1933 defines as restricted securities. 1,355,139 of our outstanding shares held by non-affiliates are eligible for resale under Rule 144 and 4,874,600 held by affiliates are available for resale in reliance upon Rule 144.

**We may, in the future, issue additional securities, which would reduce investors' percent of ownership and may dilute our share value.**

Our Articles of Incorporation authorize us to issue 50,000,000 shares of common stock and 1,000 shares of preferred stock. As of the date of February 9, 2015, we had 6,479,739 shares of common stock outstanding. Accordingly, we may issue up to an additional 43,520,261 shares of common stock. The future issuance of common stock may result in substantial dilution in the percentage of our common stock held by our then existing shareholders. We may value any common stock issued in the future on an arbitrary basis including for services or acquisitions or other corporate actions that may have the effect of diluting the value of the shares held by our stockholders, and might have an adverse effect on any trading market for our common stock. Our board of directors may designate the rights, terms and preferences of our authorized but unissued preferred shares at its discretion including conversion and voting preferences without notice to our shareholders.

**There is no assurance of a public market or that our common stock will ever trade on a recognized stock exchange. Therefore, you may be unable to liquidate your investment in our stock.**

There is no established public trading market for our common stock even though our common shares are quoted on the OTC Markets OTC Link. There can be no assurance that a regular trading market will develop or that if developed, will be sustained. In the absence of a trading market, an investor may be unable to liquidate their investment.

**Because we do not expect to pay dividends for the foreseeable future, investors seeking cash dividends should not purchase our common stock.**

We have never declared or paid any cash dividends on our common stock. We currently intend to retain future earnings, if any, to finance our business. As a result, we do not

anticipate paying any cash dividends in the foreseeable future. Our payment of any future dividends will be at the sole discretion of our board of directors after considering whether we have generated sufficient revenues, our financial condition, operating results, cash needs, growth plans and other factors. Accordingly, investors that are seeking cash dividends should not purchase our common stock.

**As an issuer of "penny stock" the protection provided by the federal securities laws relating to forward looking statements does not apply to us.**

Although the federal securities law provides a safe harbor for forward looking statements made by a public company that files reports under the federal securities laws, this safe harbor is not available to issuers of penny stocks. As a result, if we are a penny stock we will not have the benefit of this safe harbor protection in the event of any claim that the material provided by us contained a material misstatement of fact or was misleading in any material respect because of our failure to include any statements necessary to make the statements not misleading.

## FACILITIES

Our facilities are located at 747 North Church Rd, Suite F4, Elmhurst, IL 60126 and consists of 3,122 square feet. 1,200 square feet is used for the laboratory and 1,922 square feet is used for administrative and clerical purposes. We pay monthly rent of $2,471.58 for its facilities. Our facilities are sufficient for its present needs.

## OFFICERS, DIRECTORS, AND CONTROL PERSONS

The chart below sets forth the name, address and shares held and percentage of shares owned by of each of our executive officers, directors, general partners and control persons (control persons are beneficial owners of more than five percent (5%) of any class of our equity securities) as of December 31, 2013, based upon 6,479,739 shares outstanding.

Unless otherwise specified, the address of each of the persons set forth below is 747 North Church Road, Suite F4, Elmhurst, IL 60126.

| Title of Class | Position | Amount of Beneficial Ownership (1) | Direct Ownership | Indirect Ownership | Percent of Class |
|---|---|---|---|---|---|
| Common | Dr. Abdel Fahmy, Chief Executive Officer (2)(3) 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 2,937,300 | 2,937,300 | N/A | 45.3% |
| Common | Kareem Fahmy, Chief Operating Officer (2)(4) 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 1,937,300 | 1,937,300 | N/A | 39.7% |
| **Common** | **All officers and** | **4,874,600** | **4,874,600** | **N/A** | **85%** |

| | | | | | |
|---|---|---|---|---|---|
| | **directors as a group (2 persons)** | | | | |
| Series A Preferred Shares | Dr. Abdel Fahmy, Chief Executive Officer 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 600 | 600 | N/A | 60% |
| Series A Preferred Shares | Kareem Fahmy, Chief Operating Officer 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 400 | 400 | N/A | 40% |
| **Series A Preferred Shares** | **All officers and directors as a group (2 persons)** | **1,000** | **1,000** | | **100%** |

(1) Based on 6,479,739 shares of common stock issued and outstanding as of February 9, 2015. Beneficial ownership is determined in accordance with the rules of the Securities and Exchange Commission and generally includes voting or investment power with respect to securities. Except as otherwise indicated, we believe that the beneficial owners of the common stock listed above, based on information furnished by such owners, have sole investment and voting power with respect to such shares, subject to community property laws where applicable.

(2) Dr. Abdel Fahmy and Kareem Fahmy are brothers.

(3) The amount reflected does not include 3,000,000 common stock purchase warrants to Dr. Abdel Fahmy on October 23, 2013, which expire on March 31, 2015. We valued these warrants at $.0022 per share or an aggregate of $67,339. On July 23, 2010, we sold 3,000,000 common shares to Dr. Abdel Fahmy, our founder, chief executive officer and director for the price of $.0002 per share or an aggregate of $600. On January 30, 2015, we issued 600 shares of our Series A Preferred Stock to Dr. Abdel Fahmy, our chief executive officer and director for services rendered to us. Each one (1) Share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Dr. Fahmy with 30,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 600 Series A Preferred Shares issued to Dr. Fahmy at $1.00 per share or an aggregate of $600.

(4) The amount reflected does not include 2,000,000 common stock purchase warrants to Kareem Fahmy on October 23, 2013, which expire on March 31, 2015. We valued these warrants at $0.022 per share or an aggregate of $44,893. On July 23, 2010, we sold 2,000,000 common shares to Kareem Fahmy, our founder, chief operating officer and director at the price of $.0002 per share or an aggregate of $400. On January 30, 2015, we issued 400 shares of our Series A Preferred Stock to Mr. Fahmy for services rendered to us. Each one (1) Share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Mr. Fahmy with 20,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 400 Series A Preferred Shares issued to Mr. Fahmy at $1.00 per share or an aggregate of $400.

## Directors and Executive Officers

The following table sets forth the name, age, and position of our executive officers and

directors. Executive officers are elected annually by our board of directors. Each executive officer holds his office until he resigns, is removed by the Board, or his successor is elected and qualified. Directors are elected annually by our shareholders at the annual meeting. Each director holds his office until his successor is elected and qualified or his earlier resignation or removal.

| Name | Age | Position |
|---|---|---|
| Dr. Abdel Fahmy | 48 | Chief Executive Officer and Director |
| Kareem Fahmy | 33 | Chief Operating Officer and Director |

### *Dr. Abdel Fahmy, Chief Executive Officer and Director*

We were founded by Dr. Abdel Fahmy on June 30, 2009. Since that time, Dr. Fahmy has been our Chief Executive Officer and a director. From 2004 to 2011, Dr. Fahmy was a Medical Director at Access Community Health Network the nation's largest federally qualified health center. In 2006, Dr. Fahmy founded, owns and is the executive director of Soft Landing Interventions Ltd., an Illinois corporation and addiction treatment medical practice that provides services to patients from twelve (12) different states.

Dr. Fahmy is double board certified in Internal Medicine and Addiction Medicine. He was the President of the Illinois Society of Addiction Medicine from years 2007 until 2009, and an executive member of the Clinical Trial Networks, the Clinical trial arm of the National Institute on Drug Abuse, acting as the Chair of the Illinois Advisory Board on Alcohol and Substance Abuse as of 2012, and serving as the Program Director for the Screening Brief Intervention and Referral Treatment Grant provided by the Substance Abuse and Mental Health Service Agency in 2008-2011.

As our director, Dr. Fahmy brings his experience as a physician and in the clinical drug testing industry. Dr. Fahmy provides full time service to our business.

### *Kareem Fahmy, Chief Operating Officer and Director*

Since our inception on June 30, 2009, Kareem Fahmy has been the Company's Chief Operating Officer and a director. Mr. Fahmy is certified by the Project Management Institute as a Project Management Professional. From January 2008 to April 2009, Mr. Fahmy was the manager of operations at Soft Landing Interventions Ltd.

Kareem Fahmy holds a Master's Degree from the Illinois Institute of Technology in Industrial Operations and Technology ("MITO") and a Bachelor of Science degree in Thermal and Chemical Engineering from Ain Shams University, Cairo, Egypt.

As our director, Mr. Fahmy brings his experience in our day to day operations. Mr. Fahmy provides full time service to our business.

### *Family Relationships*

Dr. Abdel Fahmy, our chief executive officer and director and Kareem Fahmy, our chief operating officer and director are brothers.

Other than the foregoing, there are no family relationships among our directors and executive officers and shareholders.

## Legal/Disciplinary History

None of our officers, directors or control persons have, in the last five years, been the subject of:

A conviction in a criminal proceeding or named as a defendant in a pending criminal proceeding (excluding traffic violations and other minor offenses);

The entry of an order, judgment, or decree, not subsequently reversed, suspended or vacated, by a court of competent jurisdiction that permanently or temporarily enjoined, barred, suspended or otherwise limited such person's involvement in any type of business, securities, commodities, or banking activities;

A finding or judgment by a court of competent jurisdiction (in a civil action), the Securities and Exchange Commission, the Commodity Futures Trading Commission, or a state securities regulator of a violation of federal or state securities or commodities law, which finding or judgment has not been reversed, suspended, or vacated; or the entry of an order by a self-regulatory organization that permanently or temporarily barred suspended or otherwise limited such person's involvement in any type of business or securities activities.

## *Code of Business Conduct and Ethics*

We do not have any standing audit, nominating, and compensation committees of the board of directors, or committees performing similar functions. We do not currently have a Code of Ethics applicable to our principal executive, financial, or accounting officer. All board actions have been taken by Written Action rather than formal meetings.

The following table sets forth information concerning all cash and non-cash compensation awarded to, earned by or paid to the named persons for services rendered in all capacities for the years ending December 31, 2013 and 2014.

| Name and Principal Position | Year Ended Dec. 31 | Salary | Bonus | Stock Awards | Option Awards | Non-Equity Incentive Plan Compensation Earnings | Non-Qualified Deferred Compensation Earnings | All Other Compensation | Total |
|---|---|---|---|---|---|---|---|---|---|
| | | ($) | ($) | ($) | ($) | ($) | ($) | ($) | ($) |
| | | | | | | | | | |
| Dr. Abdel Fahmy, (1)(2) Chief Executive Officer, Director | 2014 | $150,000 | $26,094 | 0 | 0 | 0 | 0 | 0 | $176,094 |
| | 2013 | $155,538 | $4,000 | 0 | 67,339(1) | 0 | $55,196 | 0 | $282,073 |
| | | | | | | | | | |
| Kareem Fahmy, (3)(4) Chief Operating Officer, | 2014 | $90,610 | $12,635 | 0 | 0 | 0 | 0 | 0 | $103,245 |
| | 2013 | $80,961 | $2,000 | 0 | 44,893(2) | 0 | $18,852 | 0 | $146,706 |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Director | | | | | | | | | |

(1) On October 23, 2013, we issued 3,000,000 common stock purchase warrants to Dr. Abdel Fahmy. Each one (1) warrant is exercisable by the holder at the price of $1.50 per share until March 31, 2015. We valued these warrants at $.022 per share or an aggregate of $67,339.
(2) On January 30, 2015, we issued 600 shares of our Series A Preferred Stock to Dr. Abdel Fahmy, our chief executive officer and director for services rendered to us. Each one (1) Shares of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Dr. Fahmy with 30,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 600 Series A Preferred Shares issued to Dr. Fahmy at $1.00 per share or an aggregate of $600.
(3) On October 23, 2013, we issued 2,000,000 common stock purchase warrants to Mr. Fahmy. Each one (1) warrant is exercisable by the holder at the price of $1.50 per share until March 31, 2015. We valued these warrants at $.022 per share or an aggregate of $44,893.
(4) On January 30, 2015, we issued 400 shares of our Series A Preferred Stock to Mr. Fahmy for services rendered to us. Each one (1) Shares of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Mr. Fahmy with 20,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 400 Series A Preferred Shares issued to Mr. Fahmy at $1.00 per share or an aggregate of $400.

### *Employment Agreements with Management*

On February 1, 2015, we entered into an employment agreement with Dr. Abdel Fahmy, our chief executive officer and director, to provide services to us. The agreement has a term of five years and requires us to pay an annual salary of $150,000 to Dr. Fahmy for his services. The agreement provides for bonuses as determined from time to time by our board of directors.

On February 1, 2015, we entered into an employment agreement with Kareem Fahmy, our chief operating officer and director, to provide services to us. The agreement has a term of five years and requires us to pay an annual salary of $95,000 to Mr. Fahmy for his services. The agreement provides for bonuses as determined from time to time by our board of directors.

Our board of directors determines the compensation paid to our executive officers, based upon the years of service to us, whether services are provided on a full time basis and the experience and level of skill required.

We may award our officers and directors shares of common stock as non-cash compensation as determined by the board of directors from time to time. The board will base its decision to grant common stock as compensation on the level of skill required to perform the services rendered and time committed to providing services to us.

### *Outstanding Equity Awards at the End of the Fiscal Year*

We do not have and have never had any equity compensation plans and therefore no equity awards are outstanding as of February 9, 2015.

### *Director Compensation*

Our directors do not receive any other compensation for serving on the board of directors.

### *Bonuses and Deferred Compensation*
We do not have any bonus, deferred compensation or retirement plan. All decisions regarding compensation are determined by our board of directors.

### *Options and Stock Appreciation Rights*
We do not currently have a stock option or other equity incentive plan. We may adopt one or more such programs in the future.

### *Payment of Post-Termination Compensation*
We do not have change-in-control agreements with any of our directors or executive officers, and we are not obligated to pay severance or other enhanced benefits to executive officers upon termination of their employment.

### *Involvement in Certain Legal Proceedings*
There have been no events under any bankruptcy act, no criminal proceedings, no judgments, injunctions, orders or decrees material to the evaluation of the ability and integrity of any of our directors, executive officers, promoters or control persons during the past ten years.

### *Board of Directors*
All directors hold office until the next annual meeting of shareholders and until their successors have been duly elected and qualified. Officers are elected by and serve at the discretion of the board of directors.

Our directors are reimbursed for expenses incurred by them in connection with attending board meetings, but they do not receive any other compensation for serving on the board of directors.

### *Certain Relationships and Related Transactions*
On February 1, 2015, we entered into an employment agreement with Dr. Abdel Fahmy, our chief executive officer and director, to provide services to us. The agreement has a term of five years and requires us to pay $150,000 annual salary to Dr. Fahmy for his services. The agreement provides for bonus as determined from time to time by our board of directors.

On February 1, 2015, we entered into an employment agreement with Kareem Fahmy, our chief operating officer and director, to provide services to us. The agreement has a term of five years and requires us to pay $95,000 annual salary to Dr. Fahmy for his services. The agreement provides for bonus as determined from time to time by our board of directors.

On January 30, 2015, we issued 600 shares of our Series A Preferred Stock to Dr. Abdel Fahmy, our Chief Executive Officer and Director for services rendered to us. Each one (1) share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Dr. Fahmy with 30,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 600 Series A Preferred Shares issued to Dr. Fahmy at $1.00 per share or an aggregate of $600.

On January 30, 2015, we issued 400 shares of our Series A Preferred Stock to Mr. Fahmy for services rendered to us. Each one (1) share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Mr. Fahmy with

20,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 400 Series A Preferred Shares issued to Mr. Fahmy at $1.00 per share or an aggregate of $400.

On October 23, 2013, we issued 3,000,000 common stock purchase warrants to Dr. Abdel Fahmy. Each one (1) warrant is exercisable by the holder at the price of $1.50 per share until March 31, 2015. We valued the warrants at $0.022 per share or an aggregate of $67,339

On October 23, 2013, we issued 2,000,000 common stock purchase warrants to Kareem Fahmy. Each one (1) warrant is exercisable by the holder at the price of $1.50 per share until March 31, 2015. We valued the warrants at $0.022 per share or an aggregate of $44,893.

On July 23, 2010, we issued 3,000,000 common shares to Dr. Abdel Fahmy, our founder, chief executive officer and director. We valued these shares at $0.0002 per share or an aggregate of $600.

On July 23, 2010, we issued 2,000,000 common shares to Kareem Fahmy, our chief operating officer and director. We valued these shares at $0.0002 per share or an aggregate of $600.

For the year ending December 31, 2013 and nine months ending September 30, 2014, we paid the father of Dr. Abdel Fahmy, our chief executive officer and director, and Kareem Fahmy, our chief operating officer and director as an independent consultant $95,200 and $76,000, respectively.

Until April of 2012, we shared offices with Soft Landing Interventions Ltd., an Illinois corporation controlled by Dr. Abdel Fahmy, our chief executive officer and director. Dr. Abdel Fahmy, our chief executive officer and director is the executive director and office manager of Soft Landing Interventions. Also, both companies shared expenses of some employees and participated in certain general and administrative expenses. These salaries and other general and administrative expenses are allocated to companies either on a percentage basis or based on actual usage. Management believes such allocations are reasonable.

We charged $5,103 and $20,049 in 2013 and 2012, respectively, for employees loaned to an affiliate, Soft Landing Interventions Ltd. and such charge reduced the salaries expense in our statement of operations.

In 2012, we transferred the book value of certain lab equipment from an affiliate in the amount of $174,880 and their associated lease obligations of $98,528. The affiliate was subsequently dissolved in 2012.

Cash flow advances were made between the companies and our officers as needed during the years ended December 31, 2013 and 2012.

As of December 31, 2013 and 2012, we had a net receivable of $0 and $28,864, respectively, from the father of our chief executive officer and director, and chief operations officer and director.

Other than stated above, none of the following persons has any direct or indirect material interest in any transaction to which we are a party since our incorporation or in any proposed

transaction to which we are proposed to be a party:

- Any of our directors or officers;
- Any proposed nominee for election as our director;
- Any person who beneficially owns, directly or indirectly, shares carrying more than 10% of the voting rights attached to our shares; or
- Any relative or spouse of any of the foregoing persons, or any relative of such spouse, who has the same house as such person or who is a director or officer of any parent or subsidiary of our company.

## BENEFICIAL SHAREHOLDERS OF 10% OR MORE OF THE COMPANY'S SECURITIES

The chart below sets forth the name, address and shareholding and percentage of shares owned by all persons beneficially holding more than ten percent (10%) of our common shares as of January 15, 2015, based upon 6,479,739 common shares outstanding.

| Title of Class | Position | Amount of Beneficial Ownership (1) | Direct Ownership | Indirect Ownership | Percent of Class |
|---|---|---|---|---|---|
| Common | Dr. Abdel Fahmy, Chief Executive Officer (2)(3) 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 2,937,300 | 2,937,300 | N/A | 45.3% |
| Common | Kareem Fahmy, Chief Operating Officer (2)(4) 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 1,937,300 | 1,937,300 | N/A | 39.7% |
| **Common** | **All officers and directors as a group (2 persons)** | **4,874,600** | **4,874,600** | **N/A** | **85%** |
| Series A Preferred Shares | Dr. Abdel Fahmy, Chief Executive Officer 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 600 | 600 | N/A | 60% |
| Series A Preferred Shares | Kareem Fahmy, Chief Operating Officer 747 North Church Road, Suite F4, Elmhurst, IL 60126 | 400 | 400 | N/A | 40% |
| **Series A Preferred Shares** | **All officers and directors as a group (2 persons)** | **1,000** | **1,000** | | **100%** |

(1) Based on 6,479,739 shares of common stock issued and outstanding as of February 9, 2015. Beneficial ownership is determined in accordance with the rules of the Securities and Exchange Commission and generally includes voting or investment power with respect to securities. Except as otherwise indicated, we believe that the beneficial owners of the common stock listed above, based on information furnished by such owners, have sole investment and voting power with respect to such shares, subject to community property laws where applicable.
(2) Dr. Abdel Fahmy and Kareem Fahmy are brothers.
(3) The amount reflected does not include 3,000,000 common stock purchase warrants to Dr. Abdel Fahmy on October 23, 2013, which expire on March 31, 2015. We valued these warrants at $.0022 per share or an aggregate of $67,339. On July 23, 2010, we sold 3,000,000 common shares to Dr. Abdel Fahmy, our founder, chief executive officer and director for the price of $.0002 per share or an aggregate of $600. On January 30, 2015, we issued 600 shares of our Series A Preferred Stock to Dr. Abdel Fahmy, our chief executive officer and director for services rendered to us. Each one (1) Share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Dr. Fahmy with 30,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 600 Series A Preferred Shares issued to Dr. Fahmy at $1.00 per share or an aggregate of $600.
(4) The amount reflected does not include 2,000,000 common stock purchase warrants to Kareem Fahmy on October 23, 2013, which expire on March 31, 2015. We valued these warrants at $0.022 per share or an aggregate of $44,893. On July 23, 2010, we sold 2,000,000 common shares to Kareem Fahmy, our founder, chief operating officer and director at the price of $.0002 per share or an aggregate of $400. On January 30, 2015, we issued 400 shares of our Series A Preferred Stock to Mr. Fahmy for services rendered to us. Each one (1) Share of the Series A Preferred Stock provides the holder with 50,000 votes per share and as such, the Series A Preferred Shares provide Mr. Fahmy with 20,000,000 votes on all matters submitted to a vote of our common stockholders. We valued the 400 Series A Preferred Shares issued to Mr. Fahmy at $1.00 per share or an aggregate of $400.

## THIRD PARTY SERVICE PROVIDERS

The service providers below advise us with respect to matters relating to its operations, business development, financial statements and disclosures.

### Legal Counsel

Our legal counsel is Brenda Hamilton, Securities Lawyer, whose contact information is below:

Hamilton & Associates Law Group, P.A.
101 Plaza Real South, Suite 202 North
Boca Raton Florida 33432
Telephone: 561-416-8956
Facsimile 561-416-2855
http://www.securitieslawyer101.com
Email: BHamilton@securitieslawyer101.com

## Accountant

Our accountant is Katherine Odallo whose contact information is below:

Soft Landing Labs Ltd.
747 North Church Rd., Ste F4
Elmhurst, IL 60126
Telephone: 630-758-0030
Email: kodallo@softlandinglabs.com

## Investor Relations Consultant

We have not engaged an investor relations consultant.

Hamilton and Associates assisted the Company with the preparation of this Disclosure Statement. Salberg & Company audited our financial statements for the years ending December 31, 2012 and 2013. Katherine Odallo assisted us with the preparation of our financial statements for the 9 month period ending September 30, 2014. There are no other advisors that assisted, advised, prepared or provided information with respect to this Disclosure Statement.

## Other Advisors

No other advisor assisted, advised, prepared or provided information with respect to this disclosure statement.

## CERTIFICATION

I, Dr. Abdel Fahmy certify that:

I have reviewed this Annual Information and Disclosure Statement of Soft Landing Labs Ltd.

Based on my knowledge, this disclosure statement does not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading with respect to the period covered by this disclosure statement; and

Based on my knowledge, the financial statements, and other financial information included or incorporated by reference in this disclosure statement, fairly present in all material respects the financial condition, results of operations and cash flows of Soft Landing as of, and for, the periods presented in this disclosure statement.

/s/ Dr. Abdel Fahmy
By: Dr. Abdel Fahmy, President
Dated: February 9, 2015