

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000023184

Entity Name: ICON BIOMEDICAL, INC

FILED  
Apr 12, 2012  
Secretary of State

**Current Principal Place of Business:**

3475 GOLDEN GATE BLVD. W.  
NAPLES, FL 34120

**New Principal Place of Business:**

**Current Mailing Address:**

3475 GOLDEN GATE BLVD. W.  
NAPLES, FL 34120

**New Mailing Address:**

FEI Number: 27-2218603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RODI, FABIO  
3475 GOLDEN GATE BLVD. W.  
NAPLES, FL 34120 US

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

RODI, FABIO MD  
3475 GOLDEN GATE BLVD. W.  
NAPLES, FL 34120 US

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

SIGNATURE: FABIO RODI MD

Electronic Signature of Registered Agent

04/12/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RODI, FABIO MD  
Address: 3475 GOLDEN GATE BLVD. W.  
City-St-Zip: NAPLES, FL 34120

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

SIGNATURE: FABIO RODI MD

Electronic Signature of Signing Officer or Director

P

04/12/2012

Date