2010 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2010
Secretary of State

DOCUMENT# P01000032790

Entity Name: FAILURE ANALYSIS OF CARDIOVASCULAR TECHNOLOGIES, INC.

Current Principal Place of Business:

3777 GULF STREAM RD
GULF STREAM, FL 33483

New Principal Place of Business:

Current Mailing Address:

34 WASHINGTON CIRCLE
LAKE FOREST, IL 60045

New Mailing Address:

34 WASHINGTON CIR
LAKE FOREST, IL 60045

FEI Number: 65-1101667 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORENO, ANTHONY C
3777 GULF STREAM RD.
GULF STREAM, FL 33483 US

Name and Address of New Registered Agent:

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: ANTHONY MORENO

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: MORENO, ANTHONY C
Address: 3777 GULF STREAM RD.
City-St-Zip: GULF STREAM, FL 33483

Title: D
Name: MOORE, JAMES E JR.
Address: 15001 TURNBERRY CT.
City-St-Zip: COLLEGE STATION, TX 77845

Title: D
Name: KATZEN, DR.BARRY T
Address: 4201 COLLINS AVENUE, APT. 604
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: MORENO, MICHAEL R
Address: 3518 GREENRIDGE CIRCLE
City-St-Zip: BRYAN, TX 77802

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: ANTHONY MORENO D 10/19/2010

Electronic Signature of Signing Officer or Director Date