

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004404

FILED
Apr 21, 2007
Secretary of State

Entity Name: HEMOCUE, INC.

Current Principal Place of Business:

1290 WALL ST. WEST
2ND FLOOR
LYNDHURST, NJ 07071

New Principal Place of Business:

Current Mailing Address:

1290 WALL ST. WEST
2ND FLOOR
LYNDHURST, NJ 07071

New Mailing Address:

FEI Number: 33-0882550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUBOIS, DON
Address: 40 EMPIRE DRIVE
City-St-Zip: LAKE FOREST, CA 92630

Title: STD () Delete
Name: ERNST, LAWRENCE T
Address: 40 EMPIRE DRIVE
City-St-Zip: LAKE FOREST, CA 92630

Title: CD () Delete
Name: GLANZMANN, THOMAS
Address: KUVETTGATAN 1
City-St-Zip: ANGELHOLM, SWEDEN, CA 92630

Title: D () Delete
Name: ARDEVALL, MATS
Address: KUVETTGATAN 1
City-St-Zip: ANGELHOLM, SWEDEN, CA 92630

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOHAPATRA, SURYA N
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: DP (X) Change () Addition
Name: RUST, PAUL L
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: VPT (X) Change () Addition
Name: MANORY, JOSEPH P
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: AT (X) Change () Addition
Name: CALAMARI, STEPHEN A
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: S () Change (X) Addition
Name: FARRENKOPF, LEO C JR
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEO C FARRENKOPF, JR.

S

04/21/2007

Electronic Signature of Signing Officer or Director

Date