
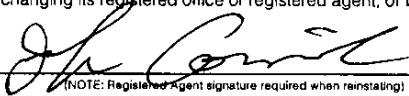



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90084 026 ***150.00

DOCUMENT # F02000003575 1. Entity Name VASCULAR SCIENCES CORPORATION- OccuLogix, Inc.					
Principal Place of Business 612 FLORIDA AVENUE PALM HARBOR, FL 34683			Mailing Address 612 FLORIDA AVENUE PALM HARBOR, FL 34683		
2. Principal Place of Business - No P.O. Box # 2600 SKYMARK AVENUE		3. Mailing Address 2600 SKYMARK AVENUE			
Suite, Apt. #, etc. BLDG 9 SUITE 201		Suite, Apt. #, etc. BLDG 9 SUITE 201			
City & State MISSISSAUGA ONTARIO		City & State MISSISSAUGA ONTARIO			
Zip L4W 5B2		Country CANADA		4. FEI Number 59-3434771	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORNISH, JOHN 612 FLORIDA AVENUE PALM HARBOR, FL 34683			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>JOHN CORNISH</u>  <u>FEB. 6, 2007</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCA SIEGEL, IRVING MD 612 FLORIDA AVENUE PALM HARBOR, FL 34683	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUMENCU, BILL 612 FLORIDA AVENUE PALM HARBOR, FL 34683	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO CALOZ, JOHN 612 FLORIDA AVE PALM HARBOR, FL 34683	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIDSON, THOMAS N 612 FLORIDA AVENUE PALM HARBOR, FL 34683	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLMES, JAY T 612 FLORIDA AVENUE PALM HARBOR, FL 34683	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDSTROM, RICHARD L 612 FLORIDA AVENUE PALM HARBOR, FL 34683	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO & T DUMENCU, BILL 2600 SKYMARK AVENUE, BLDG 9, STE 201 MISSISSAUGA, ONTARIO, L4W 5B2	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO VAMVAKAS, ELIAS 2600 SKYMARK AVENUE, BLDG 9, STE 201 MISSISSAUGA, ONTARIO, L4W 5B2	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP INVESTOR & PUBLIC AFFAIRS KILMER, STEPHEN 2600 SKYMARK AVENUE, BLDG 9, STE 201 MISSISSAUGA ONTARIO L4W 5B2	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARKETING FOTHERINGHAM, JULIE 2600 SKYMARK AVENUE, BLDG 9, STE 201 MISSISSAUGA, ONTARIO L4W 5B2	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO & PRESIDENT REEVES, THOMAS P. 2600 SKYMARK AVENUE, BLDG 9, STE 201 MISSISSAUGA, ONTARIO L4W 5B2	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>DUMENCU, BILL</u> 			<u>FEB. 6, 2007</u> <u>905 602 0887</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

20005523



02062007 Chg-P CR2E034 (12/06)

ATTACHMENT

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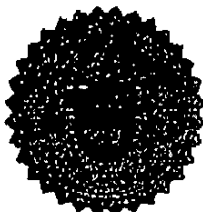
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "VASCULAR SCIENCES CORPORATION", CHANGING ITS NAME FROM "VASCULAR SCIENCES CORPORATION" TO "OCCULOGIX, INC.", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF JULY, A.D. 2004, AT 4:51 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE KENT COUNTY RECORDER OF DEEDS.



3520855 8100

040553869

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3263800

DATE: 07-29-04

20005523
ATTACHMENT # F02000003575

FROM CT WILMINGTON - 302_655_4236 GROUP 6 (WED) 7.28'04 16:54/ST.16:53/NO.4260103250 P 2

CERTIFICATE OF AMENDMENT

OF

AMENDED AND RESTATED CERTIFICATE OF INCORPORATION

OF

VASCULAR SCIENCES CORPORATION

Vascular Sciences Corporation, a corporation organized and existing under the Delaware General Corporation Law (the "Corporation"), hereby certifies:

FIRST: The amendment set forth below to the Corporation's Amended and Restated Certificate of Incorporation has been duly adopted by its Board of Directors and stockholders in accordance with the provisions of Section 242 of the Delaware General Corporation Law:

RESOLVED: To amend the Amended and Restated Certificate of Incorporation of the Corporation to delete Article 1, in its entirety, and to replace the same with the following:

1. The name of the corporation is OccuLogix, Inc.

SECOND: That this Certificate of Amendment of the Amended and Restated Certificate of Incorporation shall be effective on July 28, 2004.

* * *

ATTACHMENT

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FROM CT WILMINGTON - 302_655_4236 GROUP 5 (WED) 7. 28 '04 16:54/ST. 16:53/NO. 4260103250 P 3

IN WITNESS WHEREOF, the Corporation has caused this Certificate of
Amendment to be executed by its duly authorized officer as of the 28 day of July,
2004.

VASCULAR SCIENCES
CORPORATION

By: 

Name: Elias Vamvakas

Title: Chairman of the Board