

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2003 8:00 am
Secretary of State

05-27-2003 90161 030 ***550.00

0004097 AT

DOCUMENT # F02000006184

1. Entity Name

KRITON MEDICAL, INC.



Principal Place of Business

3351 EXECUTIVE WAY
MIRAMAR FL 33025

Mailing Address

3351 EXECUTIVE WAY
MIRAMAR FL 33025

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-3946020

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME FINE, ROBERT B
STREET ADDRESS 3351 EXECUTIVE WAY
CITY-ST-ZIP MIRAMAR FL 33025

TITLE CEO ☒ Delete
NAME FINE, ROBERT B
STREET ADDRESS 3351 EXECUTIVE WAY
CITY-ST-ZIP MIRAMAR FL 33025

TITLE AS ☒ Delete
NAME NELSON, MICHAEL S
STREET ADDRESS 3351 EXECUTIVE WAY
CITY-ST-ZIP MIRAMAR FL 33025

TITLE D ☒ Delete
NAME FORMELA, JEAN-FRANCOIS
STREET ADDRESS 3351 EXECUTIVE WAY
CITY-ST-ZIP MIRAMAR FL 33025

TITLE D ☒ Delete
NAME HARRISON, SETH L
STREET ADDRESS 3351 EXECUTIVE WAY
CITY-ST-ZIP MIRAMAR FL 33025

TITLE D ☒ Delete
NAME HUMPHREY, KEVIN J
STREET ADDRESS 3351 EXECUTIVE WAY
CITY-ST-ZIP MIRAMAR FL 33025

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CFO / Director ☐ Change ☒ Addition
NAME David Neafus
STREET ADDRESS 3351 Executive way
CITY-ST-ZIP

TITLE Steven Masson, Vice President ☐ Change ☒ Addition
NAME + Director
STREET ADDRESS 3351 Executive way
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/20/03 954-874-1225

CR2E034 (10/02)