## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000005074

Entity Name: BARRX MEDICAL, INC.

FILED Jul 05, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
540 OAKMEAD PARKWAY SUNNYVALE, CA 94085						
Current Mailing Address:			New Mailii	New Mailing Address:		
540 OAKMEAD PARKWAY SUNNYVALE, CA 94085						
FEI Number: 82-0587169 FEI Number Applied For ( ) FEI Number			mber Not Appli	licable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:						
	Electronic	Signature of Registered Agent		Date		
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS						
Title: Name: Address: City-St-Zip: Title:	BARRETT, GREG 12287 VIEWOAK SARATOGA, CA D ( ) D	DRIVE 95070 Delete	Title: Name: Address: City-St-Zip: Title: Name:	DP (X) Change ( ) Addition BARRETT, GREGORY A 540 OAKMEAD PKWY SUNNYVALE, CA 940854022 ( ) Change ( ) Addition		
Name: Address: City-St-Zip:	DOUGLAS, DAVII 3000 SAND HILL MENLO PARK, C	ROAD, BLDG. 1, STE. 135	Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	D () E EVERY, NATHAN 601 UNION STRE SEATTLE, WA 9	ET, SUITE 3200	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	GANZ, ROBERT	NUE NORTH, SUITE 30	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	KELLY, DOUG	Delete FREET, 2ND FLOOR 94301	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition BOURQUIN, RONALD E 540 OAKMEAD PKWY SUNNYVALE, CA 940854022		
Title: Name: Address: City-St-Zip:	D () E LINDHOLM, RANI 2050 PEBBLE DE ALAMO, CA 9450	RIVE	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition MCGLYNN, CASEY J ESQ. 650 PAGE MILL ROAD PALO ALTO, CA 94301		

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: RONALD BOURQUIN VP 07/05/2006