2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005856

Entity Name: SIRION HOLDINGS, INC.

FILED Apr 15, 2008 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|---|------------------------------|---------|--|-----------------------------------|--|
| 3110 CHERRY PALM DR., STE. 340 TAMPA, FL 33619 | | | | 3110 CHERRY PALM DR. SUITE 340 TAMPA, FL 33619 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 3110 CHERRY PALM DR., STE. 340 TAMPA, FL 33619 | | | | 3110 CHERRY PALM DR. SUITE 340 TAMPA, FL 33619 | | |
| FEI Number: | 20-4142367 | FEI Number Applied For () | FEI Nun | nber Not Applicable () | Certificate of Status Desired (X) | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| BENTON, SUSAN 3110 CHERRY PALM DR., STE. 340 TAMPA, FL 33619 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. | | | | | | |
| SIGNATUR | | | | | | |
| | | Signature of Registered Agen | t | | Date | |
| Election Carr | npaign Financing | Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | BUTLER, BARRY | ALM DR., STE. 340 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | BENTON, SUSAN | ALM DR., STE. 340 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () E KINSELLA, KEVII 888 PROSPECT LA JOLLA, CA 9 | ST., STE. 320 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () E MAIDA, ANTHON 828 EASTBROOF DANVILLE, CA 9 | CCT | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () E RIEDHAMMER, T 309 HIDDEN LAK BRANDON, FL 3 | E DR | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () E LABELLE, CURT 630 FIFTH AVEN NEW YORK, NY | UE, SUITE 1965 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN BENTON S 04/15/2008