

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003870

Entity Name: SAFESTITCH MEDICAL, INC.

FILED  
Apr 19, 2011  
Secretary of State

## Current Principal Place of Business:

4400 BISCAYNE BLVD.  
MIAMI, FL 33137

## New Principal Place of Business:

4400 BISCAYNE BLVD.  
850  
MIAMI, FL 33137

## Current Mailing Address:

4400 BISCAYNE BLVD.  
MIAMI, FL 33137

## New Mailing Address:

4400 BISCAYNE BLVD.  
850  
MIAMI, FL 33137

FEI Number: 11-2962080

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: C  
Name: HSIAO, JANE H PH.D.  
Address: 4400 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: PCEO  
Name: SPRAGENS, JEFFREY  
Address: 4400 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: S  
Name: WEINGARD, JOSHUA B  
Address: 4400 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: CFO  
Name: MARTIN, JAMES J  
Address: 4400 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

I hereby 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 all other like empowered.

SIGNATURE: JAMES MARTIN

CFO

04/19/2011

Electronic Signature of Signing Officer or Director

Date