

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001239

Entity Name: PARAGON BIOMEDICAL, INC.

FILED  
Jan 03, 2008  
Secretary of State

## Current Principal Place of Business:

9685 RESEARCH DRIVE  
IRVINE, CA 92618

## New Principal Place of Business:

## Current Mailing Address:

9685 RESEARCH DRIVE  
100  
IRVINE, CA 92618

## New Mailing Address:

9685 RESEARCH DRIVE  
IRVINE, CA 92618

FEI Number: 33-0394968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARACORP INCORPORATED  
236 EAST 6TH AVENUE  
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SVP ( ) Delete  
Name: REED, NICHOLAS R  
Address: 9685 RESEARCH DR  
City-St-Zip: IRVINE, CA 92618

Title: CEO ( ) Delete  
Name: REED, GENA H  
Address: 9685 RESEARCH DRIVE  
City-St-Zip: IRVINE, CA 92618

Title: CFOT ( ) Delete  
Name: OBRIEN, CAROL  
Address: 9685 RESEARCH DR  
City-St-Zip: IRVINE, CA 92618

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: COO ( ) Change (X) Addition  
Name: HARVILL, MARK  
Address: 9685 RESEARCH DRIVE  
City-St-Zip: IRVINE, CA 92618

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: JANIS DOWNIE

CSS

01/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date