

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000214

Entity Name: MICRO THERAPEUTICS, INC.

FILED
May 14, 2008
Secretary of State

Current Principal Place of Business:

9775 TOLEDO WAY
IRVINE, CA 92618 US

New Principal Place of Business:

Current Mailing Address:

9600 54TH AVE NORTH
ATTN: LEGAL DEPT.
PLYMOUTH, MN 55442 US

New Mailing Address:

FEI Number: 33-0569235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

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:

Title: DP () Delete
Name: JENUSARITIS, MATTHEW
Address: 9775 TOLEDO WAY
City-St-Zip: IRVINE, CA 92618 US

Title: DT () Delete
Name: SPANGLER, PATRICK D
Address: 9600 54TH AVE NORTH
City-St-Zip: PLYMOUTH, MN 55442 US

Title: D () Delete
Name: CORBETT, JAMES
Address: 9775 TOLEDO WAY
City-St-Zip: IRVINE, CA 92618

Title: S () Delete
Name: KLEMZ, KEVIN M
Address: 9600 54TH AVE NORTH
City-St-Zip: PLYMOUTH, MN 55442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JENUSAITIS, MATTHEW
Address: 9775 TOLEDO WAY
City-St-Zip: IRVINE, CA 92618 US

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

Title: D (X) Change () Addition
Name: PALMISANO, ROBERT
Address: 9600 54TH AVENUE NORTH
City-St-Zip: PLYMOUTH, MN 55442 US

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

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: KEVIN M. KLEMZ

SECR

05/14/2008

Electronic Signature of Signing Officer or Director

Date