2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# F98000003108

Entity Name: MOLNLYCKE HEALTH CARE, INC.

Current Principal Place of Business:

826 NEWTOWN-YARDLEY ROAD
SUITE 300
NEWTOWN, PA 18940

New Principal Place of Business:

Current Mailing Address:

826 NEWTOWN-YARDLEY ROAD
SUITE 300
NEWTOWN, PA 18940

New Mailing Address:

FEI Number: 23-2945905 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI, FL 33156 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:	D	( ) Delete
Name:	KARLSSON, ANDERS	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940 OC	
Title:	P	( ) Delete
Name:	NORDLANDER, JAN	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940 OC	
Title:	ST	( ) Delete
Name:	TIETBOHL, PATRICIA A	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940 OC	
Title:	D	( ) Delete
Name:	JOHNSON, FINN	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940	
Title:	D	( ) Delete
Name:	OLSSON, THOMAS	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940	
Title:	D	( ) Delete
Name:	HENTSCHEL, PETER	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	FILIPPINI, DANIEL A	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940 OC	
Title:	ST	(X) Change ( ) Addition
Name:	ERIKSSON, ANDERS	
Address:	826 NEWTOWN-YARDLEY ROAD, SUITE 300	
City-St-Zip:	NEWTOWN, PA 18940 OC	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDERS ERIKSSON ST 04/20/2005

Electronic Signature of Signing Officer or Director — Date