2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 29, 2005 8:00 am Secretary of State

| DOCUMENT # F9800006023 1. Entity Name ADVANCED STERILIZATION PRODUCTS SERVICES INC. | | | | | | 03-29-2005 90027 040 ***150.00 | | | | |
|---|---|--------------------------------|--|------------------------------|------------------------|--|-----------------------|----------------|------------|--|
| ADVAINOI | | | 180 | | .11 | | | | | |
| | e of Business OGY DRIVE 12718 | - 1 | | and the second second second | | 5003 | 1961 | | | |
| | | CINCINNATI, OH 45242 | *F | | . 1919) (BIN BEN) BONI | I I II I I I I I I I I I I I I I I I I | MĨ Toin krin k | | | |
| 2. Principal Pl | lace of Business | . Za | | | | | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. ML # 11 | | | <u> </u> | | 03112005 | Chg-P | CR2EC |)34 (10/03) | | |
| City & State | 9 | City & State | | | | er 5627 | | | optied For | |
| Zip | Country | Zip 45242 | Country | <u> </u> | | of Status Desired | | \$8.75 Add | ditional | |
| | 6. Name and Address of Current | | <u> </u> | | 7. Name and | Address of New | Registered . | | | |
| | · · | | ٨ | Name I | | | | | | |
| | ORATION SYSTEM TH PINE ISLAND ROAD | s | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| PLANTATION, FL 33324 | | | | | | | | | | |
| | | • | C | City FL Zip Code | | | | | | |
| | named entity submits this statement f | or the purpose of changing its | registered c | office or register | ed agent, or bo | th, in the State of | Florida. I am | familiar with, | and accept | |
| the obligations of registered agent. | | | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agen | and tale if applicable. (NOTE | Registered Ag | ent signature required | 1 when renstating) | | DATE | | | |
| FILE NOW!!! FEE IS \$150.00 \$9. Election Campaign Financing \$5.00 May Be | | | | | | | | | | |
| After Ma | ay 1, 2005 Fee will be \$550 | .00 Trust Fund Contr | ibution. | ☐ Add | ed to Fees | | | | _ | |
| 10. | OFFICERS AND | | 11. | | ADDITIONS. | CHANGES TO O | FFICERS AND | DIRECTOR | S IN 11 | |
| TITLE . | P CORSARO, SANT I | Delete | TITLE | 1 | | | | Change | . Addition | |
| name Street address City-St-Zip | 33 TECHNOLOGY DRIVE | | NAME Street a City-St- | | e atta | ched fi | or com | plete | lust. | |
| TITLE | V | • Delete | TITLE | | | | | ☐ Change | Addition | |
| NAME | GHOPERENA, ALFREDO M | | | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 33 TECHNOLOGY DRIVE | | STREET AL | 1 | | | | | | |
| TITLE | S | ☐ Delete | TITLE | - - | | | | Change | Addition | |
| NAME | BENSON, M | | NAME | | | | - | | | |
| STREET ADDRESS CITY-ST-ZIP | ONE JOHNSON &JOHNSON P NEW BRUNSWICK, NJ | _AZA | STREET AL | 1 | | | | | | |
| TITLE | С | ☐ Delete | TITLE | | | | | ☐ Change | Addition | |
| NAME | LICITRA, KAREN | | NAME | | | | | | _ | |
| STREET ADDRESS City-St-Zip | 4545 CREEK RD. | • | STREET AL | I | | | | | | |
| TITLE | CINCINNATI, OH 45242 | Delete | TITLE | | | | | Change | Addition | |
| NAME | | in Delete | NAME | | | | | L., Unange | L Auguton | |
| STREET ADORESS | | | STREET AL | DORESS | | | | | | |
| CITY-ST-ZIP | | | CITY-ST- | ZIP | | **************** | | | | |
| TITLE NAME | | ☐ Delete | TITLE NAME | | | | | Change | Addition | |
| Street Address | | | STREET AL | ODRESS | | | | | | |
| CITY-ST-ZIP | | | CITY-ST- | - 1 | | | | | | |
| 12. Thereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under ooth; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | | | | | | |

Stephan P. Brown
Date

Control of Printed Name of Signing Officer on Director

Control

Contr

ATTACHMENT

Advanced Sterilization Products Services Inc.

H:\ASP\(ASPS Officers.Directors (12.1.04).xls]FL

50031961 #F98000006023

2005 For Profit Corporation Annual Report Lines 10 and 11

| Name | Title | Address |
|------------------|---------------------------|--|
| Directors | | • |
| David Powell | | 33 Technology Dr., Irvine, CA 92618 |
| Stephen P. Brown | | 33 Technology Dr., Irvine, CA 92618 |
| M. Benson | | One Johnson & Johnson Plaza, New Brunswick, NJ 08933 |
| Karen Licitra | | 4545 Creek Rd., Cincinnati, OH 45242 |
| Officers | | |
| Karen Licitra | Chairman | 4545 Creek Rd., Cincinnati, OH 45242 |
| David Powell | President | 33 Technology Dr., Irvine, CA 92618 |
| Stephen P. Brown | VP Finance | 33 Technology Dr., Irvine, CA 92618 |
| Al Choperena | VP Research & Development | 33 Technology Dr., Irvine, CA 92618 |
| Dan Fuller | VP Marketing | 33 Technology Dr., Irvine, CA 92618 |
| David Engwall | VP Sales | 33 Technology Dr., Irvine, CA 92618 |
| Vickie Wallis | VP Information Management | 33 Technology Dr., Irvine, CA 92618 |
| Stephen P. Brown | Treasurer | 33 Technology Dr., Irvine, CA 92618 |
| M. Benson | Secretary | One Johnson & Johnson Plaza, New Brunswick, NJ 08933 |
| M. Reilly | Asst. Secretary | One Johnson & Johnson Plaza, New Brunswick, NJ 08933 |
| J. Robinson | Asst. Secretary | One Johnson & Johnson Plaza, New Brunswick, NJ 08933 |
| J. Shirtz | Asst. Secretary | One Johnson & Johnson Plaza, New Brunswick, NJ 08933 |
| Thomas Fowler | Asst. Secretary | 4545 Creek Rd., Cincinnati, OH 45242 |