## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000006023

FILED Feb 10, 2010 Secretary of State

Entity Name: ADVANCED STERILIZATION PRODUCTS SERVICES INC.

Current Principal Place of Business: New Principal Place of Business:

33 TECHNOLOGY DRIVE IRVINE, CA 92618

Current Mailing Address: New Mailing Address:

4545 CREEK RD ML #11

CINCINNATI, OH 45242 US

FEI Number: 22-3125627 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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:

Name: AUSTIN, CHARLES
Address: 33 TECHNOLOGY DRIVE
City-St-Zip: IRVINE, CA 92618

Title:

Name: SCAVILLA, DANIEL T Address: 33 TECHNOLOGY DRIVE City-St-Zip: IRVINE, CA 92618

Title: S

Name: ORLANDO, MATTHEW
Address: 33 TECHNOLOGY DRIVE
City-St-Zip: IRVINE, CA 92618

Title: 0

 Name:
 LICITRA, KAREN

 Address:
 4545 CREEK RD.

 City-St-Zip:
 CINCINNATI, OH 45242

Title: AS Name: REILEY, M

Address: ONE JOHNSON & JOHNSON PLAZA City-St-Zip: NEW BRUNSWICK, NJ 08933

Title: VP

Name: KEEN, BOBBY

Address: 33 TECHNOLOGY DRIVE City-St-Zip: IRVINE, CA 92618

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: DANIEL SCAVILLA VP 02/10/2010