2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000031083

Entity Name: SCION CARDIO-VASCULAR, INC.

FILED Jan 05, 2011 Secretary of State

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

14256 S.W. 119TH AVE. MIAMI, FL 33186 US

Current Mailing Address: New Mailing Address:

14256 S.W. 119TH AVE MIAMI, FL 33186

FEI Number: 65-0681282 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:

ROSENWEIN, LOUIS GOLDFARB, ROBERT 1000 SO. PINE ISLAND ROAD %SCION CARDIO-VASCULAR, INC. 14256 S.W. 119TH AVE. SUITE 430 MIAMI, FL 33186 US 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: ROBERT GOLDFARB 01/05/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CFO

ROSENWEIN, LOUIS Name: 14256 SW 119 AVE. Address: City-St-Zip: MIAMI, FL 33186

Title: **TCFO**

Name: RIEGLER, JAMES 14256 SW 119TH AVENUE Address: MIAMI, FL 33186 City-St-Zip:

Title: VΡ

VILLALOBOS, JOAQUIN Name: 14256 SW 119TH AVENUE Address:

City-St-Zip: MIAMI, FL 33186

Title:

ALTER, BARRY Name: Address: 14256 SW 119 AVENUE City-St-Zip: MIAMI, FL 33186

Title:

GOLDFARB, ROBERT Name: Address: 14256 SW 119 AVENUE

City-St-Zip: MIAMI, F 33186

Title:

Name: GURMAN, PETER Address: 14256 SW 119 AVENUE City-St-Zip: MIAMI, F 33186

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: JAMES RIEGLER TCFO. 01/05/2011