

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001037

Entity Name: OCTAPHARMA USA, INC.

FILED
Jan 12, 2011
Secretary of State

Current Principal Place of Business:

121 RIVER STREET
SUITE 1201
HOBOKEN, NJ 07030

New Principal Place of Business:

Current Mailing Address:

121 RIVER STREET
SUITE 1201
HOBOKEN, NJ 07030

New Mailing Address:

FEI Number: 75-3113527 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

OFFICERS AND DIRECTORS:

Title: DP
Name: NIELSEN, FLEMMING
Address: 121 RIVER STREET, SUITE 1201
City-St-Zip: HOBOKEN, NY 07030

Title: T
Name: DICRISCIO, LOUIS
Address: 121 RIVER STREET, SUITE 1201
City-St-Zip: HOBOKEN, NY 07030

Title: D
Name: MARGUERRE, WOLFGANG
Address: SEIDENSTRASSE 2, CH-8853
City-St-Zip: LACHEN, SWITZERLAND, XX

Title: S
Name: MARGUERRE, TOBIAS
Address: SEIDENSTRASSE 2, CH-8853
City-St-Zip: LACHEN, SWITZERLAND, XX

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: FLEMMING NIELSEN

PRES

01/12/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date