

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

401.222.30

Filing Period: January 1 - March 1 - Filing Fee: \$50.00' - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(ecdd)) is within the state of the file of the state of

subject to a penalty fee of \$25,00.			, , , , , ,	,	
1. Corporate ID No. 145769	2. Name of Corporation Item Holdings, Inc.				
3. Street Address Principal Business Office 55 Dupont Drive			Providence	State RI	2ip 02907
4. Business Phone No. 5. State of Incorporation (401) 272-3885 Rhode Island					
6. Brief Description of the Chancier of The design, manufacture, sa	of Business Conducted in Ri ale and distribution of	pode Island medical products an	d devices		
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) T FILL IN SPA	CES BEFORE USING	ATTACHMENTS
Stephen Lane			Aldan Petrie		
Street Address 55 Dupont Drive			Street Address 55 Dupont Drive		
Providence	State RI	շտ 02907	City Providence	State RI	2ip 02907
Secretary Name Aldan Petrie			Treasurer Name Stephen Lane		
Street Address 55 Dupont Drive			Street Address 55 Dupont Drive		
City Providence	State RI	zւր 02907	City Providence	State Ri	<i>Ζίρ</i> 02907
8. NAMES AND ADDRESSES Director Name Stephen Lane	OF THE DIRECTORS	: ("X" BOX FOR ATT	ACHMENT) FILL IN SP. Director Name Aidan Petrie	ACES BEFORE USING	ATTACHMENTS
Street Address 55 Dupont Drive			Street Address 55 Dupont Drive		
City	State	Zíp	City	State	Zip
Providence	RI	02907	Providence	RI	02907
porten intime			Director Name		
Street Address			Street Address		
Chy	State	Zip	CHY	Suite	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X ISSUED SHARES — THIS SECTION	 "	MENT)
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Cluss/Series	Par Value
			8,000	Common	\$0.01
This report must be executed on this report must be executed on	n behalf of the corpor behalf of the corpor	ration by an authorized ation by the receiver o	f representative. If the corpor r trustee.	ration is in the hands o	of a receiver or trustee,

	Under penalty of perjury, I declar	c and affirm that I have examined this report, dules and statements, and that all statements
File Date 2-23-09	contained herein are true and con	pct. 2/09
Check No	Signature	Dask (
By:MMC	Stephen Lane Print or Type Name	
FOR SECRETARY OF STATE USE ONLY	President	