



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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

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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 144450		2. Name of Corporation SOLARIS NANOSCIENCES, INC			
3. Street Address Principal Business Office 321 South Main St., Suite 102			City Providence	State RI	Zip 02903
4. Business Phone No. 401-351-6300		5. State of Incorporation			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Nabil Lawandy			Vice President Name		
Street Address 321 South Main St., Suite 102			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Nabil Lawandy			Director Name		
Street Address 321 South Main St., Suite 102			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Director Name Neil Corkery			Director Name		
Street Address 127 OCEANWOODS DR.			Street Address		
City WICKFORD	State RI	Zip 02852	City	State	Zip
9. SHARES AUTHORIZED 10,000,000 COMM \$.001, 2,000,000 PFD \$.001 PAR VALUE			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			130,065	Common	\$.001
	29,023	PFD SERIES A	\$.001		

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 SECRETARY OF STATE
 OFFICE OF THE SECRETARY OF STATE

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date **FILED**
 Check No. **APR 08 2011**
 By: **05/14/2038**
 FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature **Laurie Finnegan** Date **3/14/2011**
 Print or Type Name **LAURIE FINNEGAN**
 Title **Controller**