ORIGINAL

AO 440 (Rev. 8/01) Summons in a Civil Action

UNITED STATES DISTRICT COURT

Southern District of California

JENS ERIK SORENSEN, as Trustee of SORENSEN RESEARCH AND DEVELOPMENT TRUST,

V.

DMS HOLDINGS, INC. d.b.a. MABIS HEALTHCARE and DURO-MED INDUSTRIES, a Delaware corporation, and Does 1-100.

SUMMONS IN A CIVIL ACTION

CASE NUMBER: 08 CV 0559 H NLS

TO: (Name and address of Defendant)

DMS Holdings, Inc.
The Corporation Trust Company
Corporation Trust Center
1209 Orange Street,
Wilmington, DE 19801

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Melody A. Kramer
Kramer Law Office, Inc.
9930 Mesa Rim Rd., Suite 1600
San Diego, CA 92121
858-362-3150

an answer to the complaint which is served on you with this summons, within 20 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

W. SAMUEL HAMRICK, JR.

CLERK

(By) DEPUTY CLERK

DATE 3/25/08

American LegalNet, Inc.
www.FormsWorkflow.com

AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE

Service of the Summons and complaint was made by me(1)	DATE April 8, 2008
NAME OF SERVER *(PRINT)* Melody A. Kramer	TITLE Attorney for Plaintiff

Check one box below to indicate appropriate method of service

☐ Served personally upon the defendant. Place where served:

☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.

Name of person with whom the summons and complaint were left:

☐ Returned unexecuted:

☒ Other (specify): Mailed via Certified Mail.

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
$ 0.00	$ 6.45	$ 6.45

DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees ~~is true~~ and correct.

Executed on April 22, 2008
Date

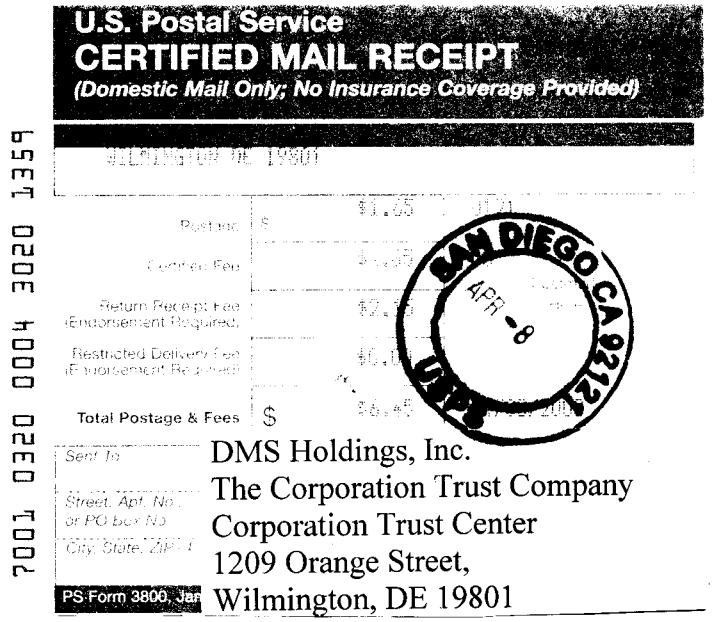
Signature of Server

9930 Mesa Rim Rd., Suite 1600
San Diego, CA 92121
Address of Server

AL KAMMAN [illegible]

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

American LegalNet, Inc.
www.FormsWorkflow.com



U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

WILMINGTON DE 19801

Postage $1.55
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

SAN DIEGO CA 92121 APR -8 USPS

7001 0320 0004 3020 1359

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

PS Form 3800, Jan

DMS Holdings, Inc.
The Corporation Trust Company
Corporation Trust Center
1209 Orange Street,
Wilmington, DE 19801

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DMS Holdings, Inc.
The Corporation Trust Company
Corporation Trust Center
1209 Orange Street,
Wilmington, DE 19801

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Scott LaDuca ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C. Date of Delivery
APR 14 2008

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7001 0320 0004 3020 1359

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540