2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0647050 AT

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DOCUMENT # F02000002517

1. Entity Name

Huckaby Pharmacal, Inc.

FILED
04 FEB 24 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
6316 OLD LAGRANGE ROAD CRESTWOOD KY 40014	11802 BRINLEY AVE., SUITE 601 LOUISVILLE KY 40243

REINSTATEMENT 03-04

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 61-1185441 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

800030961638
03/24/04--01005--009 **150.00

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		
TITLE	P	☐ Delete
NAME	LESSER, WARREN P	
STREET ADDRESS	11802 BRINLEY AVE., SUITE 201	
CITY-ST-ZIP	LOUISVILLE KY 40243	
TITLE	S	☐ Delete
NAME	FOLEY, IRVIN ESQ.	
STREET ADDRESS	11802 BRINLEY AVE., SUITE 201	
CITY-ST-ZIP	LOUISVILLE KY 40243	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	800030961638 03/24/04--01005--010 **550.00	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Warren P. Lesser 7/1/03 502 254 5552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MAGNA
Pharmaceuticals, Inc.
Accountability.

11802 Brinley Ave., Ste. 201
Louisville, KY 40243
Office: (502) 254-5552
(888) 206-5525
Fax: (502) 254-9279
E-mail: sales@magnaweb.com
www.magnaweb.com

February 20, 2004

Florida Department of State
Attn: Kathy Ashton
409 East Gaines Street
Tallahassee, FL 32399

Reference Number F02000002517

Ms Ashton:

Per our conversation this morning I am requesting a waiver of the reinstatement fee for the Huckaby Pharmacal, Inc. 2003 UBR filing. We received the original UBR form and filed it timely and did not receive the follow up letter from Justin Shriver referenced by Louise Jackson on February 18, 2004. This letter that was to notify us of the pending revocation of Huckaby Pharmacal apparently went to an incorrect address.

I have enclosed the check for the 2004 filing per your instructions and believe this is all that is needed to complete the UBR filings, as well as, the change of the corporate name. Please feel free to contact me at the above address or telephone number if there is any further information or documentation needed to complete this process.

I appreciate your help in clarifying the process and filing requirements for me and look forward to continuing a business relationship with the state of Florida.

Sincerely,

Michele Shiley

Michele Shiley
VP Finance