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FILED
May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003364 (5)

1. Corporation Name
ROSEMONT PHARMACEUTICAL CORPORATION



Principal Place of Business

301 S. CHEROKEE ST
DENVER CO 80223

Mailing Address

301 S. CHEROKEE ST
DENVER CO 80223-2114

2. Principal Place of Business

21 303 S. CHEROKEE ST
Suite, Apt #, etc.

22 City & State
23 DENVER, CO

24 Zip 80223 25 Country

2a. Mailing Address C/O AKZO NOBEL INC,

26 300 S. RIVERSIDE PLAZA
Suite, Apt. #, etc.

27 City & State
28 CHICAGO, IL

29 Zip 60606-6697 30 Country

3. Date Incorporated or Qualified
07/13/1995

3a. Date of Last Report
05/01/1996

4. FEI Number

22-2784924

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D DELETE
NAME JALINK, G.H.
STREET ADDRESS VEODERWEG 761 P O BOX 8300
CITY-ST-ZIP 6800 SB ARNHEN TH

TITLE CONT DELETE
NAME ADAIR, JOHN
STREET ADDRESS 301 S. CHEROKEE ST
CITY-ST-ZIP DENVER CO 80223

TITLE S DELETE
NAME GOLD, PETER S
STREET ADDRESS 301 S. CHEROKEE ST
CITY-ST-ZIP DENVER CO 80223

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE CONT Change Addition
2.2 NAME ADAIR, JOHN
2.3 STREET ADDRESS 303 S. CHEROKEE ST
2.4 CITY-ST-ZIP DENVER, CO 80223

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE P, D Change Addition
4.2 NAME PELLETIER, ART
4.3 STREET ADDRESS 303 S. CHEROKEE ST
4.4 CITY-ST-ZIP DENVER, CO 80223

5.1 TITLE S Change Addition
5.2 NAME MASSARI, JEFFREY T.
5.3 STREET ADDRESS C/O AKZO NOBEL INC., 300 S. RIVERSIDE PL.
5.4 CITY-ST-ZIP CHICAGO, IL 60606-6697

6.1 TITLE D Change Addition
6.2 NAME EVERS, JOHAN C.C.B.
6.3 STREET ADDRESS MOLENWEG 50, P.O. BOX 20
6.4 CITY-ST-ZIP 5340 BH OSS, THE NETHERLANDS

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. Jalink, G.H. (Typed name)

(312) 906- (Typed number)

CR2E034 (9/96)