99000004 505



ACCOUNT NO. :

072100000032

REFERENCE

170506

4306525

AUTHORIZATION

ORDER DATE : March 16, 1999

ORDER TIME :

12:18 PM

ORDER NO.

: 170506-005

CUSTOMER NO:

4306525

CUSTOMER:

Matthew Henderson, Esq

Sills Cummis Radin Tischman

One Riverfront Plaza

Newark, NJ 071025400

FOREIGN FILINGS

APOTEX CORP.

QUALIFICATION

(TYRE: <u>CO</u>) _

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

000002974420---8 -08/31/99--01010--008

***5935.00 ***5935.00

CONTACT PERSON: Tamara Odom

MC8/30/99



June 8, 1999

APOTEX CORP. % TAMMY MCINTIRE 150 SIGNET DRIVE, WESTON, ONTARIO CANADA M9L 1T9,

SUBJECT: APOTEX CORP. Ref. Number: W99000007251

This letter is in response to the application by foreign corporation for authorization to transact business in Florida that was previously submitted to this

This office received information provided by the Florida Department of Revenue, pursuant to section 213.053(14), Florida Statutes, which indicates that the corporation has transacted business in the State of Florida You were notified by letter dated March 25, 1999, that because of failure to obtain a certificate of authority prior to transacting business in the State of Florida, the corporation is liable for \$5865.00 in appropriate fees and penalties as set forth in Section 607.1502(4), Florida Statutes, (copy

Until a response is received by this office concerning the prior notification, the application by foreign corporation for authorization to transact business in Florida will not be processed. If erroneous information was reflected on the previously submitted application, a sworn affidavit may be filed stating the correct date the corporation first transacted business in Florida, that the corporation did not transact business in Florida prior to the application filing year and that the information entered on such application is incorrect. Any such affidavit will be included with your original qualification documents.

Please provide your response to this letter within 30 days to avoid the necessity

If you have further questions concerning the filing of your document, please telephone the Foreign Qualification/Tax Lien Section at (850) 487-6051.

Gretchen Harvey Document Specialist Supervisor Letter No. 499A00030829

Enclosure



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 25, 1999

CSC

client called Freelage Personal DOR/FN and attacker, officiality, etc. 6

SUBJECT: APOTEX CORP. Ref. Number: W99000007251

We have received your document(s) in this office, however, a copy of the document is being returned for the following:

Based upon information provided by the Florida Department of Revenue, pursuant to section 213.053(14), Florida Statutes, it appears that APOTEX CORP. has transacted business in Florida prior to submitting an "Application for Authority to Transact Business in Florida". Please contact this office concerning the date first transacted business in Florida.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$5865.00.

If it is determined that the corporation's previous activities in Florida that warranted compliance with Florida's revenue laws did not constitute the transaction of business within the meaning of s. 607.1501, F.S., please provide a sworn affidavit to that effect.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 699A00015123

Mar-25-1999

14:22

FNQ DISPLAY/UPDATE SCREEN Act/Inact: FNQ Add Year: 1996

Fei:133661214 W Number:

Name1: APOTEX USA INC

Addr : 1776 BROADWAY

City: NEW YORK

State: NY

Phone: 0000000000

Zip Code: 100190000

In Fla Date: 940101 Change Date: 951108 Create Date: 951108 Year End: 06 Incorp Date: 920409 StatusChg Date: 940101 Examiner:

DOR Status: ACTIVE

Corp Income Tax: 1996: 00

1995: 05 1994: 01

1993: 09

Capacity: PRESIDENT

Respond Name: TAMMY MCINTIRE Notes: Application received, rejected--assigned #W

Notes:

Notes: Date 1: 07/19/96

(F) Resp:

Date 2: 10/24/96

() Resp:

Reconciled: P Penalty Paid: Date 3: / / .

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

_	
1	APOTEX CORP.
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	DELAWARE 3 13-3661214
	State or country under the law of which it is incorporated) 3. (FEI number, if applicable)
4.	APRIL 9, 1992
	(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	UPON QUALIFICATION
	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	c/o 150 SIGNET DRIVE, WESTON, ONTARIO
	CANADA, M9L 1T9 (Current mailing address) To engage in any lawful act or activity for which a corporation may be organized under the Florida Statutes; and more specifically, to engage in the manufacture distribution and the specifically.
8.	and sale of pharmaceuticale
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: Corporation Service Company
	Office Address: 1201 Hays Street
10.	Registered agent's acceptance: (Zip Code)
Han cor regi all and	ving been named as registered agent and to accept service of process for the above stated poration at the place designated in this application, I hereby accept the appointment as istered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent. Corporation Service Company

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

A. DIRECTORS (Street address only- P. O . Box NOT accept	.o (0.2)
Chairman: See attached officers/directors rider	
Address:	S 1927
Vice Chairman:	ربية كرات م
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS (Street address only- P. O. Box NOT acceptable	
	Δι
- · · · · · · · · · · · · · · · · · · ·	
President: See attached officers/directors rider	
- · · · · · · · · · · · · · · · · · · ·	
President: See attached officers/directors rider Address:	
President: See attached officers/directors rider Address: Vice President:	
President: See attached officers/directors rider Address:	
President: See attached officers/directors rider Address: Vice President: Address:	
President: See attached officers/directors rider Address: Vice President: Address:	
President: See attached officers/directors rider Address: Vice President: Address: Secretary:	
President: See attached officers/directors rider Address: Vice President: Address: Secretary: Address:	
President: See attached officers/directors rider Address: Vice President: Address: Secretary: Address:	
President: See attached officers/directors rider Address: Vice President: Address: Secretary: Address: Treasurer:	
President: See attached officers/directors rider Address: Vice President:	
President: See attached officers/directors rider Address: Vice President: Address: Secretary: Address:	
President: See attached officers/directors rider Address: Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application	
President: See attached officers/directors rider Address: Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application officers and/or directors.	on listing additional
President: See attached officers/directors rider Address: Vice President:	on listing additional

(Typed or printed name and capacity of person signing application)

RIDER - LIST OF OFFICERS AND DIRECTORS OF APOTEX CORP.

I. <u>OFFICERS</u>:

OFFICE	BUSINESS ADDRESS
Chairman of the Board	c/o 150 Signet Drive Weston, Ontario Canada, M9L 1T9
President	c/o 3050 Universal Blvd. Suite #120 Weston, FL 33331
Vice President and Secretary	c/o 150 Signet Drive Weston, Ontario Canada, M9L 1T9
	Chairman of the Board President

II <u>DIRECTORS</u>:

NAME	BUSINESS ADDRESS
Bernard C. Sherman	c/o 150 Signet Drive Weston, Ontario Canada, M9L 1T9
Tammy McIntire	c/o 3050 Universal Blvd. Suite #120 Weston, FL 33331
Jack Kay	c/o 150 Signet Drive Weston, Ontario Canada, M9L 1T9
Alex Glasenberg	c/o 150 Signet Drive Weston, Ontario Canada, M9L 1T9
Manny Sandler	c/o 150 Signet Drive Weston, Ontario Canada, M9L 1T9

State of Detaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "APOTEX CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF JUNE, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

SEGRETARY OF STATIONS
DIVISION OF CORPORATIONS
99 AUG 30 AM IO: 26

2293995<u>8300</u> 991243838



9809745

Edward I. Freel. Secretary of State

AUTHENTICATION:

DATE: