2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 23, 2001 8:00 am Secretary of State DOCUMENT # **F99000004505** APOTEX CORP. 03-23-2001 90001 009 ***150.00 Principal Place of Business Mailing Address C/O 150 SIGNET DRIVE C/O 150 SIGNET DRIVE WESTON, ONTARIO WESTON, ONTARIO CANADA M9L 1T9 CANADA M9L 1T9 2. Principal Place of Business 2400 N. COMMERCE 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 400 Sunfé City & State 4. FEI Number Applied For 13-3661214 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) TITLE ☐ Delete TITLE Change ☐ Addition SHERMAN, BERNARD C NAME NAME 150 SIGNET DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, ONTARIO, CANADA CITY-ST-ZIP ☐ Delete TITLE Change Addition MCINTIRE, TAMMY NAME NAME # 400 2400 N. COMMERCE PKWY STREET ADORESS 150 SIGNET DRIVE STREET ADDRESS CITY-ST-ZIP WESTON, ONTARIO, CANADA WESTUN, FL 33326 CITY-ST-ZIP VSD -----TITLE ☐ Delete ☐ Change ☐ Addition TITLE GLASENBERG, ALEX NAME NAME STREET ADDRESS 150 SIGNET DRIVE STREET ADDRESS CITY-ST-ZIP WESTON, ONTARIO, CANADA CITY-ST-ZIP TITLE □ Delete ☐ Change ☐ Addition TITLE KAY, JACK NAME NAME STREET ADDRESS 150 SIGNET DRIVE STREET ADDRESS CITY-ST-ZIP WESTON, ONTARIO, CANADA CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition SANDLER, MANNY NAME NAME STREET ADDRESS 150 SIGNET DRIVE STREET ADDRESS CITY-ST-7IP WESTON, ONTARIO, CANADA CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.