FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # L11321

1. Corporation Name

DRAGON PHARMACEUTICAL INC.

Principal Place of Business	Mailing Address
	1200-543 GRANVILLE ST. VANCOUVER, BC V6C 1X8 CANADA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

3. Date Incorporated or Qualified: AUGUST 22/98

4. FEI Number: 65-0142474 — ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ERIC LITTMAN 1428 BRICKLE AVE, S/P MIAMI, FL 33131	81 Name: CORPORATION SERVICE COMPANY 82 Street Address (P.O. Box Number is Not Acceptable): 1201 HAYS STREET 83 84 City: TALLAHASSEE FL 85 Zip Code: 32301

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: Karen B. Rozar — Karen B. Rozar, Asst. Sec. — Corporation Service Company — DATE: 10/26/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (#1-12)	
TITLE	PRESIDENT/DIRECTOR ☒ DELETE	11 TITLE	PRESIDENT/DIRECTOR ☐ Change ☒ Addition
NAME	NANCY SEITZMANN	12 NAME	LONGBIN LIU
STREET ADDRESS	5600 PRESCOTT PLUM LANE	13 STREET ADDRESS	19 DRIVE
CITY ST ZIP	TAMARAC, FL 33321	14 CITY ST ZIP	WESTBORO, MA 01581
TITLE	☐ DELETE	21 TITLE	SECRETARY/DIRECTOR ☐ Change ☒ Addition
NAME	200002674442--3	22 NAME	SHAUN MASKERINE
STREET ADDRESS	-10/28/98--01054--011	23 STREET ADDRESS	1200-543 GRANVILLE ST
CITY-ST-ZIP	****150.00 ****150.00	24 CITY ST ZIP	VANCOUVER, BC V6C 1X8 CANADA
TITLE	200002674442--3 ☐ DELETE	31 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	-10/28/98--01054--012	32 NAME	KON CAI
STREET ADDRESS	******8.75 ******8.75	33 STREET ADDRESS	1200-543 GRANVILLE ST
CITY-ST-ZIP		34 CITY-ST-ZIP	VANCOUVER, BC V6C 1X8 CANADA
TITLE	☐ DELETE	41 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	200002674442--3	42 NAME	GREG HALL
STREET ADDRESS	-10/28/98--01054--013	43 STREET ADDRESS	609 GRANVILLE ST, 20TH FLOOR
CITY ST ZIP	******8.75 ******8.75	44 CITY-ST-ZIP	VANCOUVER, BC V7Y 1H2 CANADA
TITLE	☐ DELETE	51 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME		52 NAME	JACKSON CHENG
STREET ADDRESS		53 STREET ADDRESS	11/F, UNIT 1112, 63 MODY ROAD
CITY-ST-ZIP		54 CITY-ST-ZIP	KOWLOON, HONG KONG
TITLE	☐ DELETE	61 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME		62 NAME	JUNICHI GOTO
STREET ADDRESS		63 STREET ADDRESS	20/F, CITI BANK PLAZA, 3 GARDEN RD
CITY-ST-ZIP		64 CITY ST ZIP	CENTRAL, HONG KONG

14. 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 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: SHAUN MASKERINE — OCT 22/98 — 604 6698817

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

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Zip 24 Country 25	Zip 29 Country 30

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SIGNATURE: Karen B. Kar [signature] 10/26/98

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME		1.2 NAME	ALEXANDER WICK
STREET ADDRESS		1.3 STREET ADDRESS	CENTRE D'AFFAIRES LA BOURSIDIERE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	92357 LE PLESSIS ROBINSON, FRANCE
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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