2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90348 035 ***150.00

DOCUMENT # P02000124617

1. Entity Name
ANDRX PHARMACEUTICALS, INC.

40073119

Principal Place of Business	Mailing Address
4955 ORANGE DRIVE DAVIE, FL 33314	ATT: NATHAN CALI 8151 PETERS ROAD, 4TH FLOOR PLANTATION, FL 33324

04122006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	8151 Peters Road, 4th Floor Suite, Apt. #, etc. ATTN: Juan Ugalde
City & State	City & State Plantation, FL
Zip / Country	Zip 33324 / Country

4. FEI Number 32-0043602 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	Name Street Address (P.O. Box Number is Not Acceptable) 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, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP MALAHIAS, ANGELO C 8151 PETERS ROAD PLANTATION, FL 33324	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DEVP LODIN, SCOTT 8151 PETERS ROAD PLANTATION, FL 33324	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP, CFO and Treasurer Malahias, Angelo C. 8151 Peters Road, 4th Floor Planation, FL 33324	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO RICE, THOMAS P 8151 PETERS ROAD PLANTATION, FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP & Chief Scientific and Technical Officer Cappuccino, Nicholas 2945 W Corporate Lakes Blvd. Weston, FL 33331	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROSENTHAL, LAWRENCE 8151 PETERS ROAD PLANTATION, FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP, General Counsel & Secretary Goldfarb, Robert I. 8151 Peters Road 4th Floor Plantation, FL 33324	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GOLDFARB, ROBERT 8151 PETERS ROAD PLANTATION, FL 33324	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO HANSON, JOHN M 8151 PETERS ROAD PLANTATION, FL 33324	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ 4/27/06 954-382-7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SVP, General Counsel & Secretary

ATTACHMENT

Andrx
CORPORATION

400073119
#P02000094617

April 28, 2006

DHL
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Re: Andrx Pharmaceuticals, Inc.
Profit Corporation Annual Report 2006

Dear Sir or Madam:

Enclosed please find the 2006 Profit Corporation Annual Report for the above referenced company, together with a company check in the amount of $150.00 for the filing fee.

Thank you for your assistance in this matter.

Yours Truly,

Juan Ugalde
Paralegal
Andrx Corporation
Tel. 954-382-7646
juan.ugalde@andrx.com

JU
Enclosures