

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

FILED
May 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P15601 (8)
1. Corporation Name
SOLVAY PHARMACEUTICALS, INC.



Principal Place of Business 901 SAWYER ROAD MARIETTA GA 30062	Mailing Address 901 SAWYER ROAD MARIETTA GA 30062
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/17/1987	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 58-0939171		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
23 Zip	28 Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No			
24	25	29	30		

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 N. MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	11 TITLE	President CEO ☐ Change ☒ Addition
NAME	SADLER, WHITSON	12 NAME	Dodd, David A
STREET ADDRESS	3333 RICHMOND AVE.	13 STREET ADDRESS	901 Sawyer Road
CITY-ST-ZIP	HOUSTON TX	14 CITY-ST-ZIP	Marietta, GA 30062
TITLE	VP ☐ DELETE	21 TITLE	
NAME	DOWNEY, LAWRENCE	22 NAME	
STREET ADDRESS	901 SAWYER ROAD	23 STREET ADDRESS	
CITY-ST-ZIP	MARIETTA GA	24 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	31 TITLE	
NAME	BARON DANIEL JANSSEN	32 NAME	
STREET ADDRESS	33 RUE DU PRINCE ALBERT	33 STREET ADDRESS	
CITY-ST-ZIP	1050 BRUSSELS BELGIUM	34 CITY-ST-ZIP	
TITLE	VP ☐ DELETE	41 TITLE	
NAME	SOLHEIM ROBERT	42 NAME	
STREET ADDRESS	901 SAWYER RD.	43 STREET ADDRESS	
CITY-ST-ZIP	MARIETTA GA	44 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	51 TITLE	
NAME	JURGEN, ERNEST	52 NAME	
STREET ADDRESS	33 RUE DU PRINCE ALBERT	53 STREET ADDRESS	
CITY-ST-ZIP	1050 BRUSSELS BELGIUM	54 CITY-ST-ZIP	
TITLE	VPS ☐ DELETE	61 TITLE	
NAME	HETZLER, DALE	62 NAME	
STREET ADDRESS	901 SAWYER RD	63 STREET ADDRESS	
CITY-ST-ZIP	MARIETTA GA	64 CITY-ST-ZIP	

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 a 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.

CR2E034 (10/97)