2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2010
Secretary of State

DOCUMENT# P14792

Entity Name: NOVEN PHARMACEUTICALS, INC.

Current Principal Place of Business:

11960 S.W. 144TH STREET
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

11960 S.W. 144TH STREET
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-2767632 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIHM, JEFF
11960 SW 144TH ST.
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D
Name: EISENBERG, JEFFREY F
Address: 11960 SW 144TH STREET
City-St-Zip: MIAMI, FL 33186

Title: C/D
Name: NAKATOMI, KAZUHIDE
Address: 11960 SW 144TH STREET
City-St-Zip: MIAMI, FL 33186

Title: VC/D
Name: SUGIYAMA, KOUSUKE
Address: 11960 SW 144TH STREET
City-St-Zip: MIAMI, FL 33186

Title: VP
Name: MIHM, JEFF
Address: 11960 SW 144TH STREET
City-St-Zip: MIAMI, FL 33186

Title: VP
Name: PRICE, MICHAEL D
Address: 11960 SW 144TH STREET
City-St-Zip: MIAMI, FL 33186

Title: VP
Name: ESTRELLA, NATALIE P
Address: 11960 SW 144TH STREET
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFF MIHM VP 01/26/2010

Electronic Signature of Signing Officer or Director Date