2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# F01000002990

Entity Name: IMPAX STRATEGIC MARKETING & SELLING, INC.

Current Principal Place of Business:

252 WILTON ROAD
WESTPORT, CT 06880

New Principal Place of Business:

Current Mailing Address:

252 WILTON ROAD
WESTPORT, CT 06880

New Mailing Address:

FEI Number: 06-1129491 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPARBER, DOROTHY
101 SOUTH GULFSTREAM UNIT 10A
SARASOTA, FL 34326 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: PCTD ( ) Delete
Name: MATLOW, DAVID S
Address: 252 WILTON ROAD
City-St-Zip: WESTPORT, CT 06880

Title: VP ( ) Delete
Name: SHONKA, MARK
Address: 252 WILTON ROAD
City-St-Zip: WESTPORT, CT 06880

Title: D ( ) Delete
Name: KOSCH, DANIEL
Address: 252 WILTON ROAD
City-St-Zip: WESTPORT, CT 06880

Title: S ( ) Delete
Name: STRACZEK, JOHANNA
Address: 48 RAILROAD PLACE
City-St-Zip: WESTPORT, CT 06880

Title: D ( ) Delete
Name: MCKANE, DAVID B
Address: 274 RIVERSIDE AVENUE
City-St-Zip: WESTPORT, CT 06880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHANNA STRACZEK SECR 01/04/2008

Electronic Signature of Signing Officer or Director — Date