

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003775

Entity Name: WATSON PHARMA, INC.

FILED
Aug 25, 2010
Secretary of State

Current Principal Place of Business:

360 MOUNT KEMBLE AVE
MORRISTOWN, NJ 07960

New Principal Place of Business:

Current Mailing Address:

360 MOUNT KEMBLE AVE
MORRISTOWN, NJ 07960

New Mailing Address:

FEI Number: 11-2726505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PD
Name: BISARO, PAUL M
Address: 360 MT.KEMBLE AVE
City-St-Zip: MORRISTOWN, NJ 07960

Title: V
Name: RUSSILLO, THOMAS B
Address: 311 BONNIE CIRCLE
City-St-Zip: CORONA, CA 92880

Title: V
Name: HEIMERS, EDWARD F JR
Address: 360 MT.KEMBLE AVE
City-St-Zip: MORRISTOWN, NJ 07960

Title: S
Name: BUCHEN, DAVID A
Address: 311 BONNIE CIRCLE
City-St-Zip: CORONA, CA 92880

Title: TS
Name: JOYCE, R.TODD
Address: 360 MT. KEMBLE AVE.
City-St-Zip: MORRISTOWN, NJ 07960

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: DAVID A. BUCHEN

S

08/25/2010

Electronic Signature of Signing Officer or Director

Date