2005 FOR PROFIT CORPORATION REINSTATEMENT

05 MAY -9 PH 4: 11 DOCUMENT # F02000005145 GUILFORD PHARMACEUTICAL PRODUCTS INC. ALTERNATION TATE Principal Place of Business Mailing Address **6611 TRIBUTARY STREET 6611 TRIBUTARY STREET** BALTIMORE, MD 21224 BALTIMORE, MD 21224 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 56-2289265 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code FL 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 In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$300.00 corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEUD CEOD TITLE Delete TITLE ☐ Change **⋈** Addition SMITH, CRAIG R MITCHELL, DEAN NAME NAME STREET ADDRESS **6611 TRIBUTARY STREET** STREET ADDRESS 6611 TRIBUTARY STREET CITY-ST-ZIP BALTIMORE, MD 21224 CITY-ST-ZIP BALTIMORE, MD 21224 TITLE TITLE Delete ☐ Change Addition WILLIAM F. EPENGLER JORDAN, ANDREW R NAME NAME GGII TRIBUTALY STREET **6611 TRIBUTARY STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BALTIMORE, MD 21224 CITY-ST-ZIP BALTIMORE, MD 21224 s Delete TITLE TITLE Change ☐ Addition LINCK, NANCY J NAME NAME STREET ADDRESS 6611 TRIBUTARY STREET STREET ADDRESS BALTIMORE, MD 21224 CITY-ST-ZIP CITY-ST-ZIP 么) AS ☐ Delete TITLE TITLE Change ☐ Addition RUBIN, ASHER NAME NAME **6611 TRIBUTARY STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BALTIMORE, MD 21224 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition **600054744936** 05/18/05--01055--017 ***30 NAME NAME STREET ADDRESS STREET ADDRESS **300.00 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplimental 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 received 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 attaghment by the ag address, with all other like empowered.

SIGNATURE: WILLIAM F. SPENGER 4/14/05

4/14/05 410-631-6300 Date Despire Prone #

b