

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90026 025 ***150.00

DOCUMENT # F04000006447

1. Entity Name

VALERA PHARMACEUTICALS, INC.



Principal Place of Business

8 CLARKE DRIVE
CRANBURY NJ 08512

Mailing Address

8 CLARKE DRIVE
CRANBURY NJ 08512

2. Principal Place of Business

7 Clarke Drive
Suite, Apt. #, etc.

3. Mailing Address

7 Clarke Drive
Suite, Apt. #, etc.

City & State

Cranbury NJ

City & State

Cranbury NJ

Zip

08512

Country

USA

Zip

08512

Country

USA

4. FEI Number

13-4119931

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOP
TIERNEY, DAVID S
8 CLARKE DRIVE
CRANBURY NJ 08512 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
KUZMA, PETR F
8 CLARKE DRIVE
CRANBURY NJ 08512 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RUE, MATTHEW L III
8 CLARKE DRIVE
CRANBURY NJ 08512 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
PERON, PETER J
8 CLARKE DRIVE
CRANBURY NJ 08512 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HANSEN, AL
8 CLARKE DRIVE
CRANBURY NJ 08512 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GALE, JAMES C
126 EAST 56TH STREET
NEW YORK NY 10022 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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 supplemental 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 receiver 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 attachment with an address, with all other like empowered.

SIGNATURE:

Daniel J. Hayes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/05

Date

609-469-9010

Daytime Phone #