2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002856

Entity Name: BIOMARIN PHARMACEUTICAL INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
105 DIGITA NOVATO,	AL DRIVE CA 94949				
Current Mailing Address:			New Maili	New Mailing Address:	
105 DIGITA	AL DRIVE CA 94949				
NOVATO,	CA 94949				
FEI Number	: 68-0397820	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
1201 HAY	ATION SERVI S STREET SSEE, FL 323	CE COMPANY 3012525 US			
	e named entity e of Florida.	submits this statement for the p	purpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI					
	Electro	onic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (BIENAIME, JE 105 DIGITAL I NOVATO, CA	DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V (BAFFI, ROBE 105 DIGITAL I NOVATO, CA	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (KAKKIS, EMIL 105 DIGITAL NOVATO, CA	DRIVE	Title: Name: Address: City-St-Zip:	V (X) Change () Addition FUCHS, HENRY J MD 105 DIGITAL DRIVE NOVATO, CA 94949	
Title: Name: Address: City-St-Zip:	D (GREY, MICHA 105 DIGITAL I NOVATO, CA	DRIVE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LAPALME, PIERRE 105 DIGITAL DRIVE NOVATO, CA 94949	
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	VS (X) Change () Addition DAVIS, G. ERIC JD 105 DIGITAL DRIVE NOVATO, CA 94949	
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: G. ERIC DAVIS VS 04/29/2009