

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006458

FILED
Mar 05, 2009
Secretary of State

Entity Name: NOVARTIS CONSUMER HEALTH, INC.

Current Principal Place of Business:

WATERFORD BUSINESS PARK
5200 BLUE LAGOON DRIVE, 6TH FLOOR STE 690
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

WATERFORD BUSINESS PARK
5200 BLUE LAGOON DRIVE, 6TH FLOOR STE 690
MIAMI, FL 33126

New Mailing Address:

FEI Number: 06-1415390 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: EBELING, THOMAS
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: VCD () Delete
Name: COSTO, PAULO
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: D () Delete
Name: BREU, RAYMOND DR.
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: D () Delete
Name: ALLGAIER, LARRY PETER
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: D () Delete
Name: COWLES, JOHN
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: D () Delete
Name: VOGT, MATTHIAS
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: ALLGAIER, LARRY
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: CFO (X) Change () Addition
Name: CARMONA, PEPE
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: VPD (X) Change () Addition
Name: TOLMAN, DAVID DR.
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: D (X) Change () Addition
Name: HOUGH, CHARLIE VP
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: VPD (X) Change () Addition
Name: KHAN, IAN
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: VP (X) Change () Addition
Name: WOOD, MONICA
Address: 200 KIMBALL DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

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: ELIZABETH BLUMHOEFER

D

03/05/2009

Electronic Signature of Signing Officer or Director

_____ Date