

10x2

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F95000005445**

1. Entity Name
Aventis Pharmaceuticals Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
300 Somerset Corp. Blvd.
Suite, Apt. #, etc.

3. Mailing Address
Same

Suite, Apt. #, etc.

City & State
Bridgewater, New Jersey

City & State

Zip
08807

Country

USA

Zip

Country

4. FEI Number
13-2563649

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

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

1201 Hays Street

City
Tallahassee

FL Zip Code
32301

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 *Deborah D. Skipper*
Signature, typed or printed name of registered agent and title if applicable

Deborah D. Skipper
Asst. V. Pres.

4/15/03

DATE _____

(NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE President/Director
NAME Gerald P. Belle
STREET ADDRESS 300 Somerset Corporate Blvd.
CITY-ST-ZIP Bridgewater, New Jersey 08807

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

REINSTATEMENT *02/03*

TITLE Vice President/Secretary
NAME Edward H. Stratemeier
STREET ADDRESS 300 Somerset Corporate Blvd.
CITY-ST-ZIP Bridgewater, New Jersey 08807

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000016063590

TITLE Treasurer
NAME Terry G. King
STREET ADDRESS 300 Somerset Corporate Blvd.
CITY-ST-ZIP Bridgewater, New Jersey 08807

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE Asst. Secretary
NAME Owen K. Ball, Jr.
STREET ADDRESS 300 Somerset Corporate Blvd.
CITY-ST-ZIP Bridgewater, New Jersey 08807

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director
NAME Thierry Soursac
STREET ADDRESS 200 Crossing Blvd.
CITY-ST-ZIP Bridgewater, New Jersey 08807

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

766015510007

TITLE Director
NAME Richard J. Markham
STREET ADDRESS 200 Crossing Blvd.
CITY-ST-ZIP Bridgewater, New Jersey 08807

TITLE
NAME
STREET ADDRESS
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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Owen K. Ball, Jr.* Owen K. Ball, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/03 908-243-6262
Date Daytime Phone #

CR2E034B (12/02)



ACCOUNT NO. : 072100000032

REFERENCE : 999053 7352716

AUTHORIZATION : *Patrick J. Fajuts*

COST LIMIT : \$ 150.00

\$ 900.00

ORDER DATE : April 3, 2003

ORDER TIME : 10:19 AM

ORDER NO. : 999053-020

CUSTOMER NO: 7352716

CUSTOMER: Stacy Ann Apgar
Aventis Pharmaceuticals Inc.
300 Somerset Corporate Blvd.
Mailstop Sc3-820a
Bridgewater, NJ 08807-0977

RESUBMIT

Please give original
submission date as file date.

03 APR -4 BILL: 4P

RECEIVED

DEPARTMENT OF STATE
REGISTRATION
DIVISION OF
FLORIDA

ANNUAL REPORT FILING

NAME: AVENTIS PHARMACEUTICALS
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 1155

EXAMINER'S INITIALS:

03 APR 14 PA 4:32
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DEPARTMENT OF STATE
REGISTRATION
DIVISION OF
FLORIDA