

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**Apr 16 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

DOCUMENT # F97000001953 (5)
 1. Corporation Name
MERCK SHARP & DOHME (I.A.) CORP.



Principal Place of Business 14645 NW 77TH AVE. MIAMI LAKES FL 33014	Mailing Address 14645 NW 77TH AVE. MIAMI LAKES FL 33014
-----------------------------------------------------------------------------------	-----------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Fairway Corporate Cent. II Suite, Apt. #, etc. 14645 NW 77th Ave., Ste201 City & State 23 Miami Lakes, FL Zip 24 33014	2a. Mailing Address 26 c/o Merck & Co., Inc. Suite, Apt. #, etc. 27 One Merck Dr., WS3AB-05 City & State 28 Whitehouse Station, NJ Zip 29 08889-0100	Country 25 U.S.A.	Country 30 U.S.A.
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------	-----------------------------

3. Date Incorporated or Qualified 04/15/1997	4. FEI Number 13-5669634	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

B1 Name	B2 Street Address (P.O. Box Number is Not Acceptable)	B3	B4 City	B5 Zip Code
			FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent, and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> DELETE
NAME	BOULWARE-MILLER, KAY	
STREET ADDRESS	ONE MERCK DR.	
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889-0100	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	WARNER, GREY F	
STREET ADDRESS	ONE MERCK DR.	
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889-0100	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	KLIMCZAK, STEVEN R	
STREET ADDRESS	ONE MERCK DR.	
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889-0100	
TITLE	V	<input type="checkbox"/> DELETE
NAME	LEWENT, JUDY C	
STREET ADDRESS	ONE MERCK DR.	
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889-0100	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	MARCHETERRE, ANDRE	
STREET ADDRESS	ONE MERCK DR.	
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889-0100	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BYERS, CHARLES D	
STREET ADDRESS	ONE MERCK DR.	
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889-0100	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	T Dorsa, Caroline
5.3 STREET ADDRESS	One Merck Dr.
5.4 CITY-ST-ZIP	Whitehouse Station, NJ 08889-0100
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	AS Rosinski, Dolores O.
6.3 STREET ADDRESS	One Merck Dr.
6.4 CITY-ST-ZIP	Whitehouse Station, NJ 08889-0100

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Dolores O. Rosinski, Asst. Secy. 4/8/98 908-423-1688

CR2E034 (10/97)