

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90348 030 \*\*\*150.00

**DOCUMENT # P02000124630**

1. Entity Name  
**ANDRX PHARMACEUTICALS (NC), INC.**



**40073124**



Principal Place of Business  
**4955 ORANGE DRIVE  
DAVIE, FL 33314**

Mailing Address  
**8151 PETERS ROAD  
ATT: NATHAN CALI  
PLANTATION, FL 33324**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
**8151 Peters Road, 4th Floor  
ATTN: Juan Ugalde**

04122006 Chg-P CR2E034 (11/05)

City & State  
**Plantation, FL**

4. FEI Number  
**32-0043606**

Applied For  
Not Applicable

Zip  
**33324**

Country

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

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**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, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CEO  
RICE, THOMAS P  
8151 PETERS ROAD  
PLANTATION, FL 33324** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**President, CFO & Treasurer  
Malahias, Angelo C.  
8151 Peters Road, 4th Floor  
Plantation, FL 33324** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
MALAHIAS, ANGELO C  
8151 PETERS ROAD  
PLANTATION, FL 33324** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**EVP & Chief Scientific & Technical Officer  
Cappuccino, Nicholas  
2945 W Corporate Lakes Blvd.  
Weston, FL 33331** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DEVP  
LODIN, SCOTT  
8151 PETERS ROAD  
PLANTATION, FL 33324** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SVP, General Counsel & Secretary  
Goldfarb, Robert I.  
8151 Peters Road, 4th Floor  
Plantation, FL 33324** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
LODIN, SCOTT  
8151 PETERS ROAD  
PLANTATION, FL 33324** ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CFOT  
HANSON, JOHN M  
8151 PETERS ROAD  
PLANTATION, FL 33324** ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**EVP  
ROSENTHAL, LAWRENCE  
8151 PETERS ROAD  
PLANTATION, FL 33324** ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

*Robert I. Goldfarb*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/06

Date

954-382-7600

Daytime Phone #

SVP, General Counsel & Secretary



40073124  
#P02006124-630

April 28, 2006

DHL  
Division of Corporations  
2670 Executive Center Circle  
Suite 100  
Tallahassee, FL 32301

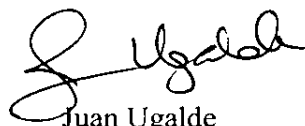
Re: Andrx Pharmaceuticals (NC), Inc.  
Profit Corporation Annual Report 2006

Dear Sir or Madam:

Enclosed please find the 2006 Profit Corporation Annual Report for the above referenced company, together with a company check in the amount of \$150.00 for the filing fee.

Thank you for your assistance in this matter.

Yours Truly,



Juan Ugalde  
Paralegal  
Andrx Corporation  
Tel. 954-382-7646  
juan.ugalde@andrx.com

JU  
Enclosures

