

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

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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
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DOCUMENT # P13739 (8)  
1. Corporation Name  
COLUMBIA LABORATORIES, INC.

Principal Place of Business  
2665 S BAYSHORE DR  
MIAMI FL 33133  
US

Mailing Address  
2665 S BAYSHORE DR  
MIAMI FL 33133  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/24/1987	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2758596	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ROELL, MARGARET Weinberg, David L. 2665 S BAYSHORE DR MIAMI FL 33133		10. Name and Address of New Registered Agent Weinberg, David L.	
81 Name		82 Street Address (P.O. Box Number Is Not Acceptable)	
83		84 City	
85 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 *David L. Weinberg* DATE April 13, 1998  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	V
NAME	MEIER, NORMAN M.	1.2 NAME	Leving, Howard
STREET ADDRESS	2665 S BAYSHORE DR	1.3 STREET ADDRESS	2665 So. Bayshore Dr.
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL
TITLE	VST	2.1 TITLE	VST
NAME	ROELL, MARGARET	2.2 NAME	Weinberg, David L.
STREET ADDRESS	2665 S BAYSHORE DR	2.3 STREET ADDRESS	2665 South Bayshore Dr.
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL
TITLE	DC	3.1 TITLE	
NAME	BOLOGNA, WILLIAM J.	3.2 NAME	
STREET ADDRESS	2665 S BAYSHORE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	DVC	4.1 TITLE	
NAME	BUONICONTI, NICHOLAS	4.2 NAME	
STREET ADDRESS	2665 S BAYSHORE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	DOMINIQUE DE ZIEGLER	5.2 NAME	
STREET ADDRESS	2665 S. BAYSHORE DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *David L. Weinberg* DATE: May 5, 1998 305-860-1693

CR2E034 (10/97)