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Apr 01 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 # **P21429** (6)
1. Corporation Name
NEUTROGENA CORPORATION

Principal Place of Business

**5755 WEST 96TH STREET
LOS ANGELES CA 90045**

Mailing Address

**5760 W. 96TH ST.
LOS ANGELES CA 90045
US**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/24/1988

4. FEI Number
95-2221471

Applied For
Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. Same as above	26. Same as above
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22.	27.
City & State	City & State
23.	28.
Zip	Zip
Country	Country
24.	29.
25.	30.

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Vice President
NAME	NUGENT, JEFFREY M	1.2 NAME	Reback, Mitch
STREET ADDRESS	5760 WEST 96TH STREET	1.3 STREET ADDRESS	5760 W 96th Street
CITY-ST-ZIP	LOS ANGELES CA	1.4 CITY-ST-ZIP	Los Angeles, CA 90045
TITLE	AS	2.1 TITLE	Secretary
NAME	BERLIN, K.A.	2.2 NAME	Malin, Donna
STREET ADDRESS	ONE JOHNSON & JOHNSON PLAZA	2.3 STREET ADDRESS	One Johnson & Johnson Plaza
CITY-ST-ZIP	NEW BRUNSWICK NJ	2.4 CITY-ST-ZIP	New Brunswick, NJ 08933
TITLE	S	3.1 TITLE	
NAME	HILTON, J R	3.2 NAME	
STREET ADDRESS	1 JOHNSON & JOHNSON PLAZA	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRUNSWICK NJ	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	
NAME	PATERSON, C.H.	4.2 NAME	
STREET ADDRESS	1 JOHNSON & JOHNSON PLAZA	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRUNSWICK NJ	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	SCHORT, D R	5.2 NAME	
STREET ADDRESS	5760 WEST 96TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	5.4 CITY-ST-ZIP	
TITLE	P	6.1 TITLE	
NAME	BARDIN, CHRISTIAN	6.2 NAME	
STREET ADDRESS	5760 WEST 96TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	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 in an attachment with an address.

SIGNATURE:

(Mitch Reback), Vice President Finance 3/11/98

CR2E034 (10/97)