

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

FILED
Feb 03 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 # **P24046** (5)
1. Corporation Name
IVAX INDUSTRIES, INC.



Principal Place of Business ROCK PLAZA III 101 ROCK ROAD HORSHAM PA 19044	Mailing Address ROCK PLAZA III 101 ROCK ROAD HORSHAM PA 19044
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 c/o IVAX Corporation Suite, Apt. #, etc. 22 4400 Biscayne Blvd. City & State 23 Miami, Florida Zip 24 33137	2a. Mailing Address 26 c/o IVAX Corporation Suite, Apt. #, etc. 27 4400 Biscayne Blvd. City & State 28 Miami, Florida Zip 29 33137
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3. Date Incorporated or Qualified 04/25/1989	4. FEI Number 22-2855144	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 TABERNILLA, ARMANDO A. 4400 BISCAYNE BOULEVARD MIAMI FL 33137	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALUTI, GERALD	1.2 NAME	SEE ATTACHED LIST
STREET ADDRESS	ROCK PLAZA III, 101 ROCK ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	HORSHAM PA	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	PFFENNINGER, RICHARD C	2.2 NAME	
STREET ADDRESS	4400 BISCAYNE BOULEVARD	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33137	2.4 CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TABERNILLA, ARMANDO A	3.2 NAME	
STREET ADDRESS	4400 BISCAYNE BOULEVARD	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33137	3.4 CITY-ST-ZIP	
TITLE	CFO <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIEBOLD, JOSEPH	4.2 NAME	
STREET ADDRESS	ROCK PLAZA III, 101 ROCK ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	HORSHAM PA 19044	4.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAFARO, STEVE	5.2 NAME	
STREET ADDRESS	ROCK PLAZA III, 101 ROCK ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	HORSHAM PA 19044	5.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TARPLEE, MARK	6.2 NAME	
STREET ADDRESS	ROCK PLAZA III, 101 ROCK ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	HORSHAM PA	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 _____ 1/20/98

CR2E034 (10/97)

**1998 FLORIDA CORPORATION ANNUAL REPORT
IVAX INDUSTRIES, INC.
Question 12 & 13**

D/P

Saluti, Gerald Ph.D.

4400 Biscayne Boulevard, Miami, FL 33137

D/S

Tabernilla, Armando A.

4400 Biscayne Boulevard, Miami, FL 33137

D/VP

Millsap, James M.

4400 Biscayne Boulevard, Miami, FL 33137

VP

Beier, Thomas E.

4400 Biscayne Boulevard, Miami, FL 33137

T

Siegel, Jordan

4400 Biscayne Boulevard, Miami, FL 33137

AS

Eisenberg, Jeffrey F.

4400 Biscayne Boulevard, Miami, FL 33137

AS

Nation, Marianne Hurd

4400 Biscayne Boulevard, Miami, FL 33137