FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 24 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P24338 (6)

1. Corporation Name
ALPHA THERAPEUTIC CORPORATION

Principal Place of Business	Mailing Address
% TAX DEPARTMENT 5555 VALLEY BLVD LOS ANGELES CA 90032	% TAX DEPARTMENT 5555 VALLEY BLVD LOS ANGELES CA 90032

DO NOT WRITE IN THIS SPACE.

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

3. Date Incorporated or Qualified: 05/16/1989
3a. Date of Last Report: 05/01/1994
4. FEI Number: 95-3267178 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes* ☒ Yes ☐ No

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 FL 85 Zip Code

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 1 TITLE	President and CEO ☒ Change ☐ Addition
NAME	MATVELD, H, EDWARD	1 2 NAME	
STREET ADDRESS	5555 VALLEY BOULEVARD	1 3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	1 4 CITY-ST-ZIP	
TITLE	V	2 1 TITLE	Senior Vice President ☒ Change ☐ Addition
NAME	HARTIN, WILLIAM, G	2 2 NAME	
STREET ADDRESS	5555 VALLEY BOULEVARD	2 3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	2 4 CITY-ST-ZIP	
TITLE	V	3 1 TITLE	Senior Vice President ☒ Change ☐ Addition
NAME	DE HART, PETER	3 2 NAME	
STREET ADDRESS	5555 VALLEY BOULEVARD	3 3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	3 4 CITY-ST-ZIP	
TITLE	SVS	4 1 TITLE	☐ Change ☐ Addition
NAME	COLTON, EDWARD, A	4 2 NAME	
STREET ADDRESS	5555 VALLEY BOULEVARD	4 3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	4 4 CITY-ST-ZIP	
TITLE	V	5 1 TITLE	Senior Vice President ☒ Change ☐ Addition
NAME	GROVEMAN, GEORGE	5 2 NAME	John Whalen, MD
STREET ADDRESS	5555 VALLEY BOULEVARD	5 3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	5 4 CITY-ST-ZIP	
TITLE	SVTC	6 1 TITLE	☐ Change ☐ Addition
NAME	NAKAGAWA, KEN	6 2 NAME	
STREET ADDRESS	5555 VALLEY BOULEVARD	6 3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	6 4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Edward A. Colton 4/3/95 (213) 227-7011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0401889 FP

ALPHA THERAPEUTIC CORPORATION

OFFICERS

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H. Edward Matveld	President and CEO
William G. Hartin	General Manager, Biological Division/ Senior V.P.
John Whalen, MD	General Manager, Pharmaceutical Division/Senior V.P.
Kensuke Nakagawa	Sr. V.P., CFO & Treasurer
Edward A. Colton	Sr. V.P., General Counsel & Corporate Secretary
Pete DeHart	Sr. V.P., Sales & Marketing
Cheryl Lawrence	V.P., Finance
Sue Preston	V.P., Regulatory Affairs
Gregory Rich	V.P., Spain Operations
Jeff Silverman	V.P., Manufacturing
Bill Thorne	V.P., International Sales & Marketing
Willie Zuniga	V.P., Manufacturing

Address for all Officers is:

Alpha Therapeutic Corporation
5555 Valley Boulevard
Los Angeles, CA 90032

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ALPHA THERAPEUTIC CORPORATION

DIRECTORS

1. Hidetoshi Asakura
2. John Castello
3. Kazunari Doi
4. Takehiko Kawano, PhD
5. H. Edward Matveld
6. Clyde B. McAuley, MD
7. Kensuke Nakagawa
8. Edward A. Colton

Address for all Directors is:

Alpha Therapeutic Corporation
5555 Valley Boulevard
Los Angeles, CA 90032

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