2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2018
Secretary of State
CC5191915430

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Entity Name: CATALYST PHARMACEUTICALS, INC.

Current Principal Place of Business:

355 ALHAMBRA CIRCLE
SUITE 1250
CORAL GABLES, FL 33134

Current Mailing Address:

355 ALHAMBRA CIRCLE
SUITE 1250
CORAL GABLES, FL 33134 US

FEI Number: 76-0837053

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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.

SIGNATURE: ANGEL NUNEZ 03/06/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEOC	Title	CFOT
Name	MCENANY, PATRICK J	Name	GRANDE, ALICIA
Address	355 ALHAMBRA CIRCLE SUITE 1250	Address	355 ALHAMBRA CIRCLE SUITE 1250
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	DIRECTOR	Title	DIRECTOR
Name	O'KEEFFE, CHARLES B	Name	COELHO, PHILIP H
Address	355 ALHAMBRA CIRCLE SUITE 1250	Address	355 ALHAMBRA CIRCLE SUITE 1250
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	DIRECTOR	Title	DIRECTOR
Name	TIERNEY, DAVID S	Name	DENKHAUS, DONALD A
Address	355 ALHAMBRA CIRCLE SUITE 1250	Address	355 ALHAMBRA CIRCLE SUITE 1250
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	DIRECTOR		
Name	DALY, RICHARD		
Address	355 ALHAMBRA CIRCLE SUITE 1250		
City-State-Zip:	CORAL GABLES FL 33134		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALICIA GRANDE CFO 03/06/2018

Electronic Signature of Signing Officer/Director Detail — Date