## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000000625

Entity Name: IMPAX LABORATORIES, INC.

**Current Principal Place of Business:** 

30831 HUNTWOOD AVENUE HAYWARD. CA 64544

**Current Mailing Address:** 

30831 HUNTWOOD AVENUE HAYWARD, CA 64544 US

FEI Number: 65-0403311 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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:

Electronic Signature of Registered Agent

Date

FILED Apr 26, 2018

Secretary of State

CC0743497364

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

NameBISARO, PAUL MNameWILKINSON, G. FREDERICKAddress30831 HUNTWOOD AVENUEAddress30831 HUNTWOOD AVENUE

City-State-Zip: HAYWARD CA 64544 City-State-Zip: HAYWARD CA 64544

Title DIRECTOR Title DIRECTOR

Name VERGIS, JANET Name TERRERI, PETER R.

Address 30831 HUNTWOOD AVENUE Address 30831 HUNTWOOD AVENUE

City-State-Zip: HAYWARD CA 64544 City-State-Zip: HAYWARD CA 64544

Title SECRETARY Title DIRECTOR

Name SCHLOSSBERG, MARK A. Name PENDERGRAST, MARY K.

Address 30831 HUNTWOOD AVENUE Address 30831 HUNTWOOD AVENUE

City-State-Zip: HAYWARD CA 64544 City-State-Zip: HAYWARD CA 64544

Title DIRECTOR Title DIRECTOR

Name CHAO, ALLEN Name BURR, ROBERT L.

Address 30831 HUNTWOOD AVENUE Address 30831 HUNTWOOD AVENUE

City-State-Zip: HAYWARD CA 64544 City-State-Zip: HAYWARD CA 64544

Continues on page 2

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: MARK A. SCHLOSSBERG

Electronic Signature of Signing Officer/Director Detail

**SECRETARY** 

04/26/2018

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BIERLY, RICHARD Name BENET, LESLIE Z.

Address 30831 HUNTWOOD AVENUE Address 30831 HUNTWOOD AVENUE

City-State-Zip: HAYWARD CA 64544 City-State-Zip: HAYWARD CA 64544