

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 10, 2001 8:00 am**  
**Secretary of State**

05-10-2001 90098 012 \*\*\*150.00

0329484

**DOCUMENT # 822581**

1. Entity Name  
**NABI, INC.**

Principal Place of Business <b>5800 PARK OF COMMERCE BLVD. NW          BOCA RATON FL 33487          US</b>	Mailing Address <b>5800 PARK OF COMMERCE BLVD. NW          BOCA RATON FL 33487          US</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number **59-1212264** Applied For  Not Applicable

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



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**MC LAIN, THOMAS**  
**5800 PARK OF COMMERCE BLVD. NW**  
**BOCA RATON FL 33487**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 \_\_\_\_\_  
**FL** Zip Code \_\_\_\_\_

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

*See Attach listing for additional officers/directors*

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>CONSTANTINE, ALEXANDER</b> <b>ONE INTERNATIONAL PLACE</b> <b>BOSTON MA</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO</b> <b>GURY, DAVID J.</b> <b>5800 PARK OF COMMERCE BLVD. NW</b> <b>BOCA RATON FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP</b> <b>NASO, ROBERT B PHD</b> <b>5800 PARK OF COMMERCE BLVD VW</b> <b>BOCA RATON FL 33487</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP</b> <b>MCLAIN, THOMAS H</b> <b>5800 PARK OF COMMERCE BLVD. NW.</b> <b>BOCA RATON FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CAO</b> <b>SMITH, MARK L</b> <b>5800 PARK OF COMMERCE BLVD. NW</b> <b>BOCA RATON FL 33487</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SRVP</b> <b>MUTH, DAVID D</b> <b>5800 PARK OF COMMERCE BLVD NW</b> <b>BOCA RATON FL 33487</b> <input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Exec. V.P. + C.O.O.</b> <b>McLain, Thomas H.</b> <b>5800 Park of Commerce Blvd NW</b> <b>Boca Raton, FL 33487</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Sr V.P. Finance + CFO</b> <b>Smith, Mark L.</b> <b>5800 Park of Commerce Blvd NW</b> <b>Boca Raton, FL 33487</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark L. Smith **MARK L. Smith** 4-18-01 561 989 5800  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

**Nabi - Officers**  
**As of May 26, 2000**

*Attachment  
 DH 822581  
 B0050389*

Name	Street / City / State / Zip
David J. Gury Chairman of the Board, Chief Executive Officer and President SS# 378-36-1684	Nabi 5800 Park of Commerce Blvd NW Boca Raton, FL 33487
Robert B. Naso, P.H.D. Senior Vice President , Quality, Regulatory and Product Development SS# 068-36-0917	Same
Thomas H. McLain Executive Vice President and Chief Operating Officer SS# 066 38 8593	Same
Bruce K. Farley Senior Vice President, Manufacturing Operations SS#145-38-5285	Same
Constantine Alexander Secretary SS# 077-32-6922	Nutter, McClennen & Fish One International Place Boston, MA 02110-2699
Anna E. Mack Sr. Director, General Counsel and Assistant Secretary SS# 074-38-7263	Nabi 5800 Park of Commerce Blvd NW Boca Raton, FL 33487
Mark L. Smith Senior Vice President, Finance and Chief Financial Officer SS# 554-91-2042	Nabi 5800 Park of Commerce Blvd NW Boca Raton, FL 33487