

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 11, 2002 8:00 am
Secretary of State

07-11-2002 90245 037 ***550.00

DOCUMENT # F97000003090

1. Entity Name
SANKYO PHARMA INC

Principal Place of Business

**780 THIRD AVENUE
 47TH FLOOR
 NEW YORK NY 10017
 US**

Mailing Address

**780 THIRD AVENUE
 47TH FLOOR
 NEW YORK NY 10017
 US**

2. Principal Place of Business

3. Mailing Address

2 Hilton Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Parsippany New Jersey

4. FEI Number

13-3914479

Applied For

Not Applicable

Zip

Country

Zip

Country

07054

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD
 PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

Signature, typed or printed name of registered agent and title if applicable.

(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)**

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**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

**10. Election Campaign Financing
 Trust Fund Contribution.**

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**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME OGAWA, KOJI
STREET ADDRESS 780 THIRD AVE.
CITY-ST-ZIP NEW YORK NY 10017

☐ Delete

TITLE T
NAME KOIZUMI, TATSUYA
STREET ADDRESS 780 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY 10017

☒ Delete

TITLE D
NAME SHODA, TAKASHI
STREET ADDRESS 780 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY 10017

☐ Delete

TITLE P
NAME PIERONI, JOE
STREET ADDRESS TWO HILTON COURT
CITY-ST-ZIP PARSIPPANY NJ 07054

☐ Delete

TITLE D
NAME NAKAMURA, KANECHZ
STREET ADDRESS 780 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY 10017

☒ Delete

TITLE P
NAME NAKAMURA, KANICHI
STREET ADDRESS 780 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY 10017

☒ Delete

TITLE P and D
NAME Dr. John Alexander
STREET ADDRESS 399 Thornall St.
CITY-ST-ZIP Edison, NJ 08837

☐ Change

☒ Addition

TITLE P and D
NAME Dr. Hiroyoshi, Hori Koshi
STREET ADDRESS 4250 Executive Square Suite 420
CITY-ST-ZIP La Jolla, CA 92037-9105

☐ Change

☒ Addition

TITLE D
NAME Shoda, Takashi
STREET ADDRESS 5-1 Nihonbashi Honcho 3-chome
CITY-ST-ZIP Chuo-Ku, Tokyo Japan 103-8426

☒ Change

☐ Addition

TITLE P and D
NAME Pieroni, Joseph
STREET ADDRESS 2 H. Hon Court
CITY-ST-ZIP Parsippany, NJ 07054

☒ Change

☐ Addition

TITLE Koshino, Hisao
NAME
STREET ADDRESS 780 3rd Ave.
CITY-ST-ZIP New York, NY 10017

☐ Change

☒ Addition

TITLE D
NAME Hitosugi, Yasuhiro
STREET ADDRESS 5-1 Nihonbashi Honcho 3-chome
CITY-ST-ZIP Chuo-Ku, Tokyo Japan 103-8426

☐ Change

☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-9-02

212 8848305

CR2E034 (9/01)