

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000056370

Entity Name: ANDA PHARMACEUTICALS, INC.

Current Principal Place of Business:

6500 ADELAIDE COURT
GROVEPORT, OH 43125

Current Mailing Address:

400 INTERPACE PARKWAY
ATTN: LOIS PAGANO
PARSIPPANY, NJ 07054 US

FEI Number: 82-0541812

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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

Officer/Director Detail :

Title DP
Name BISARO, PAUL M
Address 400 INTERPACE PARKWAY
City-State-Zip: PARSEPPANY NJ 07054

Title EVP
Name PAONESSA, ALBERT III
Address 2915 WESTON ROAD
City-State-Zip: FORT LAUDERDALE FL 33331

Title S
Name BUCHEN, DAVID A
Address 400 INTERPACE PARKWAY
City-State-Zip: PARSEPPANY NJ 07054

Title SVP
Name GIORDANO, THOMAS
Address 13900 NW SECOND STREET
City-State-Zip: SUNRISE FL 33325

Title CFO
Name JOYCE, R.TODD
Address 400 INTERPACE PARKWAY
City-State-Zip: PARSEPPANY NJ 07054

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: DAVID A BUCHEN

SEC

04/11/2014

Electronic Signature of Signing Officer/Director Detail

Date