

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15601

FILED  
Jul 27, 2005  
Secretary of State

Entity Name: SOLVAY PHARMACEUTICALS, INC.

**Current Principal Place of Business:**

901 SAWYER ROAD  
MARIETTA, GA 30062

**New Principal Place of Business:**

**Current Mailing Address:**

901 SAWYER ROAD  
MARIETTA, GA 30062

**New Mailing Address:**

FEI Number: 58-0939171      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 N. MAGNOLIA STREET  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SADLER, WHITSON  
Address: 3333 RICHMOND AVE.  
City-St-Zip: HOUSTON, TX

Title: P ( ) Delete  
Name: SHLEVIN, HAROLD H  
Address: 901 SAWYER RD  
City-St-Zip: MARIETTA, GA 30062

Title: D ( ) Delete  
Name: UHRHAN, PHILLIP M  
Address: 3333 RICHMOND AVENUE  
City-St-Zip: HOUSTON, TX 77098

Title: VP ( ) Delete  
Name: MERCIER, GUY  
Address: 901 SAWYER RD.  
City-St-Zip: MARIETTA, GA 30062

Title: VD (X) Delete  
Name: JURGEN, ERNEST  
Address: 33 RUE DU PRINCE ALBERT  
City-St-Zip: 1050 BRUSSELS BELGIUM,

Title: VPS (X) Delete  
Name: LINSCOTT, WALTER  
Address: 901 SAWYER ROAD  
City-St-Zip: MARIETTA, GA 30062

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SADLER, WHITSON  
Address: 3333 RICHMOND AVE.  
City-St-Zip: HOUSTON, TX 77098

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: KAY, MURRAY  
Address: 901 SAWYER ROAD  
City-St-Zip: MARIETTA, GA 30062

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HAROLD SHLEVIN

P

07/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date