



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. Corporate ID No. 000549737

2. Name of Corporation Wallace Pharmaceuticals Inc.

3. Street Address Principal Business Office:

No. and Street: 781 CHESTNUT RIDGE ROAD

City or Town: MORGANTOWN

State: WV Zip: 26505 Country: USA

4. Business Phone No.

5. State of Incorporation

State: DE

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

424210

6. Brief Description of the Character of Business Conducted in Rhode Island

PHARMACEUTICALS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|----------------|--|--|
| SECRETARY | THOMAS SALUS | 1000 MYLAN BOULEVARD CANONSBURG, PA 15317 USA |
| VICE PRESIDENT | ALAN WEINER | 781 CHESTNUT RIDGE ROAD |

| | | |
|-----------------|------------------|---|
| | | MORGANTOWN, WV 26505 USA |
| ASST. SECRETARY | KEVIN MACIKOWSKI | 781 CHESTNUT RIDGE ROAD MORGANTOWN, WV 26505 USA |
| TREASURER/CFO | JOHN MIRAGLIA | 1000 MYLAN BOULEVARD CANONSBURG, PA 15317 USA |
| VICE PRESIDENT | JOHN MIRAGLIA | 1000 MYLAN BOULEVARD CANONSBURG, PA 15317 USA |
| DIRECTOR | JOHN MIRAGLIA | 1000 MYLAN BOULEVARD CANONSBURG, PA 15317 USA |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares <i>Number of Shares</i> | Total Issued and Outstanding <i>Num of Shares</i> |
|----------------|-----------------|---------------------|---|--|
| CNP | | \$0.0000 | 200.00 | 100 |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 1 Day of February, 2021 at 4:43:16 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By LANCE FARRIS

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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