

1.) CORPORATION NAME:

Shionogi Inc.

DUE DATE: **4/30/2012**

SCC ID NO: **F1857103**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 CAMPUS DRIVE

CITY/ST/ZIP: FLORHAM PARK, NJ 07932-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: ISAO TESHIOGI
TITLE: CHAIRMAN
ADDRESS: 1-8, DOSHOMACHI 3-CHOME
CITY/ST/ZIP/CO: CHUO-KU, OSAKA 541-0045-, JAPAN

OFFICER

DIRECTOR

NAME: TAKUKO SAWADA
TITLE: DIRECTOR
ADDRESS: 1-8, DOSHOMACHI 3-CHOME
CITY/ST/ZIP/CO: CHUO-KU, OSAKA 541-0045-, JAPAN

OFFICER

DIRECTOR

NAME: YUUJI HOSOGAI
TITLE: DIRECTOR
ADDRESS: 1-8, DOSHOMACHI 3-CHOME
CITY/ST/ZIP/CO: CHUO-KU, OSAKA 541-0045-, JAPAN

OFFICER

DIRECTOR

NAME: JOHN KELLER
TITLE: PRESIDENT
ADDRESS: 300 CAMPUS DRIVE
CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932-

OFFICER

DIRECTOR

NAME: MICHAEL MILLIGAN
TITLE: VICE PRESIDENT
ADDRESS: 300 CAMPUS DRIVE
CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932-

OFFICER

DIRECTOR

NAME: SUSAN WITHAM TITLE: VICE PRESIDENT ADDRESS: 300 CAMPUS DRIVE CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DEANNE MELLOY TITLE: VICE PRESIDENT ADDRESS: 300 CAMPUS DRIVE CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: TADASHI HARA TITLE: TREASURER ADDRESS: 300 CAMPUS DRIVE CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ANN RAPPLEYE TITLE: SECRETARY ADDRESS: 300 CAMPUS DRIVE CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MASAAKI TAKEYASU TITLE: DIRECTOR ADDRESS: 1-8, DOSHOMACHI 3-CHOME CITY/ST/ZIP/CO: CHUO-KU, OSAKA 541-0045-, JAPAN	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ MICHAEL MILLIGAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL MILLIGAN, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	2/8/2012 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		