

Edgar Filing: Endo Pharmaceuticals Solutions Inc. - Form SC 13G/A

Endo Pharmaceuticals Solutions Inc.  
Form SC 13G/A  
August 05, 2009

UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

SCHEDULE 13G/A

UNDER THE SECURITIES EXCHANGE ACT OF 1934

(AMENDMENT NO. 8) \*

ENDO PHARMACEUTICALS SOLUTIONS INC. (FORMERLY INDEVUS PHARMACEUTICALS, INC.)  
(Name of Issuer)

COMMON STOCK, PAR VALUE \$.001  
(Title of Class of Securities)

454072109  
(CUSIP Number)

JULY 24, 2009  
(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- Rule 13d-1(b)
- Rule 13d-1(c)
- Rule 13d-1(d)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

PERSONS WHO ARE TO RESPOND TO THE COLLECTION OF INFORMATION CONTAINED IN THIS FORM ARE NOT REQUIRED TO RESPOND UNLESS THE FORM DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER.

SEC 1745 (12-02)

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1. NAMES OF REPORTING PERSONS  
I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY)

PERCEPTIVE ADVISORS LLC  
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2. CHECK THE APPROPRIATE BOX IF A GROUP\* (a)   
(b)   
-----

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3. SEC USE ONLY

4. CITIZENSHIP OR PLACE OF ORGANIZATION

UNITED STATES OF AMERICA

|  |                            |    |
|--|----------------------------|----|
| NUMBER OF<br>SHARES  | 5. SOLE VOTING POWER       | 0  |
| BENEFICIALLY<br>OWNED BY<br>EACH<br>REPORTING<br>PERSON WITH:                                  | 6. SHARED VOTING POWER     | 0  |
|  | 7. SOLE DISPOSITIVE POWER  | 0  |
|  | 8. SHARED DISPOSTIVE POWER | 0  |
| 9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON                                |                            | 0  |
| 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES<br>(SEE INSTRUCTIONS) |                            |    |
| 11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)  |                            | 0% |
| 12. TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)  |                            | IA |

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13. NAMES OF REPORTING PERSONS

I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY)

JOSEPH EDELMAN

|   |                              |
|---|------------------------------|
| 14. CHECK THE APPROPRIATE BOX IF A GROUP* | (a) <input type="checkbox"/> |
|   | (b) <input type="checkbox"/> |

15. SEC USE ONLY

16. CITIZENSHIP OR PLACE OF ORGANIZATION

UNITED STATES OF AMERICA

|  |                             |    |
|--|-----------------------------|----|
| NUMBER OF<br>SHARES  | 17. SOLE VOTING POWER       | 0  |
| BENEFICIALLY<br>OWNED BY<br>EACH<br>REPORTING<br>PERSON WITH:                                  | 18. SHARED VOTING POWER     | 0  |
|  | 19. SOLE DISPOSITIVE POWER  | 0  |
|  | 20. SHARED DISPOSTIVE POWER | 0  |
| 21. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON                               |                             | 0  |
| 22. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES<br>(SEE INSTRUCTIONS) |                             |    |
| 23. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)  |                             | 0% |
| 24. TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)  |                             | IN |

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- ITEM 1. (a) Name of Issuer:  
Endo Pharmaceuticals Solutions Inc.  
(formerly Indevus Pharmaceuticals, Inc.)
- (b) Address of Issuer's Principal Executive Offices:  
33 Hayden Avenue  
Lexington, MA 02421
- ITEM 2. (a) Name of Person Filing:  
This Schedule is being filed with respect to shares of Common Stock of the Issuer which are beneficially owned by Joseph Edelman. See Item 4 below.
- (b) Address of Principal Business Office or, if none, Residence:  
Perceptive Advisors LLC  
499 Park Avenue, 25th Floor  
New York, NY 10022
- (c) Citizenship:  
Each of the Reporting Person is a United States Citizen
- (d) Title of Class of Securities:  
Common Stock, par value \$.001
- (e) CUSIP Number:  
454072109
- ITEM 3. IF THIS STATEMENT IS FILED PURSUANT TO SS.SS.240.13D-1(B) OR 240.13D-2(B) OR (C), CHECK WHETHER THE PERSON FILING IS A:
- (a)  Broker or dealer registered under section 15 of the Act (15 U.S.C. 78o).
- (b)  Bank as defined in section 3(a)(6) of the Act (15 U.S.C. 78c).
- (c)  Insurance company as defined in section 3(a)(19) of the Act (15 U.S.C. 78c).
- (d)  Investment company registered under section 8 of the Investment Company Act of 1940 (15 U.S.C 80a-8).
- (e)  An investment adviser in accordance with ss.240.13d-1(b)(1)(ii)(E);
- (f)  An employee benefit plan or endowment fund in accordance with ss.240.13d-1(b)(1)(ii)(F);
- (g)  A parent holding company or control person in accordance with ss. 240.13d-1(b)(1)(ii)(G);
- (h)  A savings associations as defined in Section 3(b) of the Federal Deposit Insurance Act (12 U.S.C. 1813);
- (i)  A church plan that is excluded from the definition of an investment company under section 3(c)(14) of the Investment Company Act of 1940 (15 U.S.C. 80a-3);
- (j)  Group, in accordance with ss.240.13d-1(b)(1)(ii)(J).

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ITEM 4. OWNERSHIP.

Provide the following information regarding the aggregate number and

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percentage of the class of securities of the issuer identified in Item 1.

- (a) Amount beneficially owned: 0
- (b) Percent of class: 0%

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- (c) Number of shares as to which each person has:
  - (i) Sole power to vote or to direct the vote: 0
  - (ii) Shared power to vote or to direct the vote: 0
  - (iii) Sole power to dispose or to direct the disposition of: 0
  - (iv) Shared power to dispose or to direct the disposition of: 0

ITEM 5. OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following [X].

ITEM 6. OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON

Not applicable.

ITEM 7. IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON.

Not applicable.

ITEM 8. IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP.

Not applicable.

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ITEM 9. NOTICE OF DISSOLUTION OF GROUP.

Not applicable.

ITEM 10. CERTIFICATION

The following certification shall be included if the statement is filed pursuant to ss.240.13d-1(b):

- (a) By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect. [X]

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SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

August 4, 2009

-----  
Date

/s/ Joseph Edelman

-----  
Signature

Joseph Edelman

-----  
Name/Title

The original statement shall be signed by each person on whose behalf the statement is filed or his authorized representative. If the statement is signed on behalf of a person by his authorized representative other than an executive officer or general partner of the filing person, evidence of the representative's authority to sign on behalf of such person shall be filed with the statement, provided, however, that a power of attorney for this purpose which is already on file with the Commission may be incorporated by reference. The name and any title of each person who signs the statement shall be typed or printed beneath his signature.

NOTE: Schedules filed in paper format shall include a signed original and five copies of the schedule, including all exhibits. SEE ss.240.13d-7 for other parties for whom copies are to be sent.

ATTENTION: INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACT CONSTITUTE FEDERAL CRIMINAL VIOLATIONS (SEE 18 U.S.C. 1001)