FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE: W



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 815301 ELF ATOCHEM NORTH AMERICA, INC.

(7)

FILED May 13 1998 8:00am Secretary of State

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215-419-7000

						<u>-</u>			
Principal Place of Business Mailing Address							******	II) \$16.	
2000 MARKET		2000 MARKET ST							
C/O TAX DEF	PT. A PA 19103-222	C/O TAX DEPT.				DO NOT WRITE IN THIS SPACE			
US	N FR 18100-222	PHILADELPHIA PA 19103-222 US				3. Date Incorporated or Qualified			
**						05/27/1961			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		ΙΑρ	plied For
21		26				23-0960890			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.		Additional
22		27				5. Certificate of Status Desired	Fe	ee Re	quired
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			o Fees
Zip Country		Zip Country			y .	8. This corporation owes or has paid the current year Intangible			
24	25	29	1 - 1		- 	Personal Property Tax due June 30.	☐ Yes		J No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
	CORPORATION SYSTEM			61	Name				
	00 S. PINE ISLAND ROAD		İ	82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
PU	ANTATION FL 33324								
			i	83	1				
			}	84	City		85	Zip C	Code
							-L		·
11. Pursuant t	to the provisions of Sections 607.050	12 and 607.1508, Florida St	talutes, the at	OVE	e-named corporation	oration submits this statement for the purpos on's board of directors. I hereby accept the	e of chang	ing its	s registered
agent. I a	m familiar with, and accept the oblig-	ations of, Section 607.0509	5, Florida State	utes	9 the corporati 8.	orra board of directors. Thereby accept the	арронины	111 63	chistorea
SIGNATURE							_		
	Signature, typed or printed name of registered aux		<u> </u>	J Age	ent signature require				0.15.40
12.	OFFICERS AN	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIHEC		S IN 12
TITLE	AZOLHAV DEDALADO D	☐ Offf#		1.1 TITLE			L Gna	ange	Addition
NAME	AZOULAY, BERNARD D.	1.2 NAME		ļ					
STREET ADDRESS	2000 MARKET ST			1.3 STREET ADDRESS					
CITY-ST-ZIP	PHILADELPHIA PA	T or ore			ST-ZIP				E de la
TITLE	SVP	☐ DELETE	1		ł		☐ Cha	ange	Addition
NAME	UTECHT, ANDREA E		2.2 NA						
STREET ADDRESS	2000 MARKET ST		2.3 STREET ADDRESS						
CITY - ST - ZIP	PHILADELPHIS PA	Distrete			ST-ZIP		T ás		The angles
TITLE	EVP	☐ DELETE					☐ Cha	ange	Addition
NAME	REBEILLE, JEAN-CLAUDE		3.2 NA						
STREET ADDRESS	2000 MARKET ST				ADDRESS				
CITY-ST-ZIP	PHILADELPHIA PA				ST-ZIP				1 7 7 150
TITLE	SVPT	☐ DELETE					☐ Cha	ange	☐ Addition
NAME	COX, DOUGLAS L.		4. 2 NA	ME					
STREET ADDRESS	2000 MARKET ST		4.3 ST	REET	T ADDRESS				
CITY-ST-ZIP	PHILADELPHIA PA		4.4 CIT	• • •	ST-ZIP				
TITLE	0	☐ DELETE	51 TIT	LΕ			∐ Cha	រកជួខ	Addition
NAME			5.2 NA	5.2 NAME					
STREET ADDRESS			5.3 ST	5.3 STREET ADDRESS					
CITY-ST-ZIP	PHILADELPHIA PA 19103		5.4 CIT		ST-ZIP				
TITLE		□ DELETË	TË 6.1 THTL				Cha	ange	☐ Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accepted and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the coreover or trustee empowered to evide this report as equired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.