

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 A
Secretary of State

DOCUMENT # 834430

1. Entity Name
INDUSTRIAL CHEMICALS, INC.



Principal Place of Business

**INDUSTRIAL CHEMICALS, INC
2042 MONTREAT DRIVE
BIRMINGHAM, AL 35216**

Mailing Address

**INDUSTRIAL CHEMICALS, INC
PO BOX 660688
BIRMINGHAM, AL 35266**



01092008 No Chg-P CR2E034 (11/05)

4. FEI Number

63-0583643

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**THE MDA GROUP, INC.
5416 HIGHWAY 98 WEST
SANTA ROSA BEACH, FL 32459**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME WELCH, WILLIAM L.
STREET ADDRESS 2042 MONTREAT DRIVE
CITY-ST-ZIP B'HAM, AL 35216

TITLE VPD
NAME WELCH, LONNIE B. JR.
STREET ADDRESS 2042 MONTREAT DRIVE
CITY-ST-ZIP B'HAM, AL 35216

TITLE D
NAME WELCH, WILLIAM L.
STREET ADDRESS 2042 MONTREAT DR.
CITY-ST-ZIP B'HAM, AL 35216

TITLE S
NAME WELCH, WILLIAM L JR
STREET ADDRESS 2042 MONTREAT DR
CITY-ST-ZIP BIRMINGHAM, AL 35216

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/9/08

(205) 823 7330