2005 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT # F03000000851 .

Principal Place of Business

MASTERCHEM BRANDS, INC.

3135 HIGHWAY M IMPERIAL, MO 63052

SIGNATURE:

Mailing Address

21001 VAN BORN ROAD TAYLOR, MI 48180

FILED Apr 25, 2005 08:00 AM Secretary of State



04202005

No Chg-P

CR2E034 (10/03)

4. FEI Number 43-0918324

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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4/20/05

313/274-7400

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, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PGM KORTE, STANLEY 3135 HWY M IMPERIAL, MO 63052				U00000331048 04/25/05-80183-023 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEEKLEY, JOHN R 21001 VAN BORN RD. TAYLOR, MI 481801340					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVTA ROSOWSKI, ROBERT B 21001 VAN BORN RD. TAYLOR, MI 48180		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GARGARO, EUGENE A JR. 21001 VAN BORN RD. TAYLOR, MI 48180			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DORAN, DAVID A 21001 VAN BORN RD. TAYLOR, MI 48180					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS WADHAMS, TIMOTHY 21001 VAN BORN RD. TAYLOR, MI 48180					
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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.						

Doran, VP

David A.)

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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