

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

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Jul 15, 1999 8:00 am
Secretary of State

07-15-1999 90001 050 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 35827
 1. Corporation Name
Phoenix Phosphors, Inc.

Principal Place of Business Mailing Address
2377 S. Rd. 37 South P.O. Box 1439
Mulberry, FL 33860 Mulberry, FL 33860

DO NOT WRITE IN THIS SPACE

21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
23	City & State	27	City & State
24	Zip	28	Zip
25	Country	29	Country
30		30	

3.	Date Incorporated or Qualified	
	10-8-91	
4.	FEI Number	Applied For
	52-1548327	Not Applicable
5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8.	This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
John M. Wehrung 10301 U.S. Hwy 27 Clermont, FL 34711				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE John M. Wehrung **John M. Wehrung** DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President, Dir. <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John M. Wehrung	1.2 NAME	
STREET ADDRESS	10301 U.S. Hwy 27	1.3 STREET ADDRESS	
CITY-ST-ZIP	Clermont, FL 34711	1.4 CITY-ST-ZIP	
TITLE	VP STD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Thomas P. Nadolski	2.2 NAME	
STREET ADDRESS	912 Centerbrook Dr.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Brandon, FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard I. Chaifetz	3.2 NAME	
STREET ADDRESS	3 Fulham Ct.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Silver Spring, MD 20902	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John M. Wehrung **President** 4/21/99 (914) 425-1432
Signature and typed or printed name of signing officer or director Date Daytime Phone #



PHOENIX PHOSPHORS, INC.

P. O. BOX 1439
Mulberry, Florida 33860
Tel: (941) 425-1430
FAX: (941) 425-1524

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588466-90001-50

June 28, 1999

Annual Reports Filings
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We submitted our annual report on 4/21/99 along with a check in the amount of \$150.00. By the the end of June 1999, we have not received back from our bank the canceled check for this payment. Accordingly, we are placing a stop payment on that check and enclosing a new check along with a copy of the submitted report. I am not sure why the check was not cashed, but we wish to remain current with our filings. If you encounter the previous check (#4955, dated 4/21/99), please return it to us.

Thank you for your attention to this matter.

Sincerely,

John M. Wehrung
President