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Feb 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P38986 (6)  
1. Corporation Name  
AMGLO KEMLITE LABORATORIES, INC.



Principal Place of Business: 8787 ENTERPRISE BLVD. LARGO FL 34649  
Mailing Address: 8787 ENTERPRISE BLVD. LARGO FL 33773-2702

3. Date Incorporated or Qualified: 05/21/1992  
3a. Date of Last Report: 04/02/1996  
4. FEI Number: 36-2981045  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent  
HYLAND, JAMES H.  
1460 GULF BLVD., #903  
CLEARWATER FL 34630

10. Name and Address of New Registered Agent  
81 Name: HYLAND, JAMES H  
82 Street Address (P.O. Box Number is Not Acceptable): 103 MORGAN DRIVE  
83  
84 City: BELLEAIR BEACH FL 85 Zip Code: 34634

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE: VP  
NAME: IZABELLA, DURNIN  
STREET ADDRESS: 215 GETWAY ROAD  
CITY-ST-ZIP: BENSENVILLE IL  
TITLE: D  
NAME: KERCHENFAUT, LARRY A.  
STREET ADDRESS: 215 GATEWAY RD.  
CITY-ST-ZIP: BENSENVILLE IL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE: CP  
1.2 NAME: HYLAND, JAMES H  
1.3 STREET ADDRESS: 103 MORGAN DRIVE  
1.4 CITY-ST-ZIP: BELLEAIR BEACH, FL 34634

14. I do 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.

SIGNATURE: LARRY A. KERCHENFAUT  
Date: 2/18/97  
Daytime Phone: 620 350 9470

CR2E034 (9/96)