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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P38986

(6)

Mailing Address

AMGLO KEMLITE LABORATORIES, INC.

FILED
Feb 25 1997 8:00am
Secretary of State

Suite Apt # etc.  Suite Apt # etc.  Suite Apt #, etc.  5. Certificate of Status Desired Fee Required  City & State  City & State  City & State  City & State  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fee Required  S5. On May Re	8787 ENTERPRISE BLVD. LARGO FL 34649		8787 ENTERPRISE BLVD. LARGO FL 33773-2702						
Suito App. 8   60								Report	
Solito Apr. et cl.    Surviva   Surv	2. Principa' P	lace of Business	2a. Mailing Address			4. FÉI Number		Applied For	
Solito Apr. et cl.    Surviva   Surv	21		26			36-2981045		lot Applicable	
Section   Country   26	Suite Apt. # etc. Suite, Apt. #, e		h			5. Certificate of Status Desired	1 1 '	· ·	
Section   Sect		e	h						
10. Name and Address of Current Registered Agent	Zφ		·	<b>├</b> ─¬	ry	· · · · · · · · · · · · · · · · · · ·			
HYLAND, JAMES H.   1460 QUE BLVD, #903   103 MORGAN DRIVE   82 Street Address (P.O. Box Number is Not Acceptable)   103 MORGAN DRIVE   85 Zip Code   34634				1001				****	
1460 GÜLF BLVD, #903   103 HORGAN DRIVE   103 HOR	HVI	AND JAMES H							
1. Fursion: To the provisions of Sections 607 05.02 and 607 15.08. Florida Statutus, the above-hander corporation is blank this statement for the purpose of changing its registered agent. For its many with, and accept the obligations of, Section 607 05.02 and 607 15.08. Florida Statutus, the above-hander corporation's blank this statement for the purpose of changing its registered agent. Fair fram ser with, and accept the obligations of, Section 607 0505, Florida Statutus.    SIGNATURE		-		-	HYLAND, JAMES H				
	CLEARWATER FL 34630 103 MORGAN DRIVE								
	i			L					
1.1. Fursional to the purvisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-handed corporation submits this statement for the purpose of changing life registered agent of the corporation's board of directors. I hereby accept the appointment as registered agent at familiar with, and accept the obligations of, Section 607 0905, Florida Statutios.  SIGNATURE				8		I DATE TOLON			
SIGNATURN   Signature with and accept the obligations of, Section 607 (890s, Florida Statutes.)	11 Purcusat	To the provisions of Sections 60	7 05.02 and 607 1508. Florida Statu	ites the abr	ve-named r	corporation submits this statement for the p		its registered	
No.	office or r agent 1 a	registored agent for both, in the time familiar with, and accept the i	State of Florida. Such change was obligations of, Section 607.0505, F	authorized lorida Statu	by the corp es.	oration's board of directors. I hereby accep	t the appointment a	s registered	
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE								
THE   VP					gent signature r				
NAME   CABELLA, DURNIN   12 NAME   13 STREET ADDRESS   14 CITY-ST-2P						AUDITIONS/CHANGES TO OFFIC			
STREET ACCRESS   SENSENVILLE		*'					L Change		
DELETE   STREET ADDRESS   CTY-ST-7P   CTANGE					1				
TITLE									
NAME   STREET ADDRESS		··· <u>-</u>	DECETE				Chapas	Addition	
STREET ADDRESS   SHOREWAY RD.   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP		•	<del>-</del>		Į.		Orange	Monton (	
CHY-ST-ZP    BENSENVILLE					-			}	
DELETE									
NAME		DENSENVILLE IL	Dr. FTF			AT	Change	Addition	
STREET ADDRESS   S.3 STREET ADDRESS   S.4 CITY-ST-ZIP   S.4 CITY-ST-ZIP   STACH, FT. 34634   Change   Addition			m accere		1	— <del>-</del> -	L Change	X) Addition	
Street Address   Stre									
DELETE				<b>.</b> .	1			1	
NAME			Donette			BELLEAIR BRACH, FL 3463	4 Chang	Addition	
STREET ADDRESS			רייז חננגוג	1			L. Charge	Modition	
C-1Y - ST - ZIP									
DELETE	STREET ADDRESS								
NAME         52 NAME           STREEL ADCRESS         53 STREET ADDRESS           CUY-S1-7IP         54 CITY-ST-7IP           TITLE         DELETE         6.1 TITLE           NAME         62 NAME           STREEL ADCRESS         63 STREET ADDRESS           CITY-S1-7IP         64 CITY-ST-7IP			Print				Change	Addition	
STREET ADDRESS			ויין טינונונ				∟ Ghange	- Madillou	
COY+S1-7IP									
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-S1-ZIP         6.4 CITY-ST-ZIP								1	
NAME         6.2 NAME           STREEL ADDRESS         6.3 STREET ADDRESS           CITY+S1-7/P         6.4 CITY+ST-7/P			T brieff				10	Addition	
STREET ADDRESS CITY-S1-ZIP 63 STREET ADDRESS 64 CITY-ST-ZIP			L_J DELETE		1		E_1 change	Abdition	
CITY-S1-ZIP 64 CITY-ST-ZIP	1			1	)			ţ	
	STREET ADDRESS			63 STR	EET ADDRESS				
		ļ,				110.01111111111111111111111111111111111			

14. I do hereby certify that the information supplied with this filing goes not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 alphaged, or on an exactment with an address.

SIGNATURE:

LARRY A. KERCHEN

97 630 350 9470