

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000066556 (6)
 1. Corporation Name
AURUM CHEMICALS CORP.



Principal Place of Business 701 BRICKELL AVE. SUITE 1200 MIAMI FL 33131	Mailing Address 701 BRICKELL AVE. SUITE 1200 MIAMI FL 33131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 48 E. Flagler St. Suite, Apt. #, etc.		2a. Mailing Address 26 48 E. Flagler St. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/31/1997	
22 Suite 368 City & State		27 Suite 368 City & State		4. FEI Number 65-0784032	
23 Miami, FL Zip		28 Miami, FL Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 33131		29 33131		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Dade		30 Dade		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent KENNEY, JUDITH 701 BRICKELL AVE, SUITE 1200 MIAMI FL 33131				10. Name and Address of New Registered Agent			
81 Name Judith Kenney, Attorney				82 Street Address (P.O. Box Number is Not Acceptable) Montello & Kenney, P.A.			
83 777 Brickell Avenue, Suite 1070				84 City Miami			
85 Zip Code 33131							

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: *Judith Kenney* DATE: **4/23/98**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASTELLANOS, RODRIGO A			1.2 NAME	Castellanos, Rodrigo A.		
STREET ADDRESS	701 BRICKELL AVE, SUITE 1200			1.3 STREET ADDRESS	48 E. Flagler Street, Suite 368		
CITY-ST-ZIP	MIAMI FL 33131			1.4 CITY-ST-ZIP	Miami, FL 33131		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				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.

SIGNATURE: *Judith Kenney, Attorney-in-Fact* DATE: **4/23/98** (205) 373-0300

CR2E034 (10/97)