PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000066556**

1. Corporation Name AURUM CHEMICALS CORP.

1999

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90255 016 ***150.00



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Principal Place of Business			Mailing Address					1 18811		20131 AD 111 AD114	41114 BIJOL BIJAJ B	1116 01() (90)
48 E FLAGLER ST #368 MIAMI FL 33131 US			48 E FLAGLER ST #368 Miami FL 33131 US						DO NOT WE	RITE IN THIS	SPACE	
								3. Date Incorporated or Qualifed				
							- 1 (07/31/1	997			
2. Principal Pl	ace of Business	2a.	Mailing Address					El Numb		,	Арр	lied For
21 9260 S.W. 72nd Street 26 9260 S.W. 7					2nd Street			65-0784	032		Not	Applicable
Suite, Apt.			Suite, Apt. #, etc.						•		\$8.75 Ac	dditional
22 206		27	_					5. Certificate of Status Desired Fee Required				
City & State			City & State					6. Election Campaign Financing S5.00 May Be				
23 Miami, Fl			28 Miami Fl				1	Trust Fund Contribution Added to Fees				
Zip Country			Zip Country				8.	This como	ration owes the cu	rrent year In	tangible	7
24 33173	25 Dade	29	33173	30	Dad	1			Property Tax.	•		□No
24 33173	9. Name and Address of Current			11	vac	.e	10.	Name and	Address of New	Registered	Agent	
	81	Name										
KENNEY, JUDITH												
MONTELLO & KENNEY, P.A.					82	Street Ad	dress (P.	O. Box Nu	imber is Not Accep	otable)		
777 BRICKELL AVE #1070					83				_			
MIAMI FL 33131					"						*	
MINIMA LE 30101					84	City				FL	85 Zip C	ođe
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									_		<u> </u>	\
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register					stered Agent signature required when reinstating) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
12.	OFFICERS ANI	D DIRE		1			A	DDITIONS	CHANGES TO C	PFFICERS A	Change	Addition
TITLE	D		☐ DELETE	1.1	TITLE	[☐ change	
NAME	Castellanos, Rodrigo A			1.3	NAME	,					•	ļ
STREET ADDRESS	48 E FLAGLER ST #368			1.3	STREE	F ADDRESS	9260	S.W.	72nd Str	eet , S	uite 200	6
CITY-ST-ZIP	MIAMI FL 33131			1.4	CITY-S	T-ZIP		i, F1				
TITLE			☐ DELETE	2.1	TITLE						Change	☐ Addition
NAME	•			2.3	NAME	}						
STREET ADORESS				2.3	STREE	TADDRESS					-	
CITY-ST-ZIP		-		-u > .2.	4 CITY-S	ST-ZIP	₩.			, <u></u>		· -
TITLE	*		☐ DELETE	3.	TITLE						☐ Change	Addition
NAME				3.3	NAME						•	
STREET ADDRESS						TADDRESS						
					. CITY-S							
CITY-ST-ZIP			☐ DELETE	_	TITLE)1-2IF			.		Change	Addition

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 address, with all other like empowered.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE NAME,

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

☐ DELETE

☐ DELETE

☐ Change

Change

☐ Addition

☐ Addition