

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

FILED

Feb 19 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 # P37275 (5)

1. Corporation Name
CERAMX CORPORATION

Principal Place of Business

PO BOX 89
LAURENS SC 29360
US

Mailing Address

PO BOX 89
LAURENS SC 29360-0089
US

3. Date Incorporated or Qualified

01/27/1992

3a. Date of Last Report

01/31/1996

4. FEI Number

52-1708698

Applied For

Not Applicable

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

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	<input checked="" type="checkbox"/> DELETE
NAME	EICHLER, PETER S	
STREET ADDRESS	HIGHWAY 14	
CITY-ST-ZIP	LAURENS SC	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HOMBURG, AXEL DR.	
STREET ADDRESS	DYNAMIT NOBEL AC KAISERSTRASSE	
CITY-ST-ZIP	TROISDORF GE	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JUD, HANS	
STREET ADDRESS	CERASIV GMBH FABRIKSTRASSE 23 29	
CITY-ST-ZIP	PLOCHINGEN GE	
TITLE	C	<input type="checkbox"/> DELETE
NAME	ROOST, DELI	
STREET ADDRESS	LERASIV GMBH FABRISTRASSE 23 29	
CITY-ST-ZIP	PLOCHINGEN GE	
TITLE	BM	<input type="checkbox"/> DELETE
NAME	MULLER, ROLF-MICHAEL	
STREET ADDRESS	CERASIV GMBH FABRISTRASSE 23 29	
CITY-ST-ZIP	PLOCHINGEN GE	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	P Hubert V. Wyzlic
1.3 STREET ADDRESS	Highway 14
1.4 CITY-ST-ZIP	Laurens, SC 29360
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	CeramTec AG Fabrikstrasse 23 29
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Roost, Ueli
4.3 STREET ADDRESS	CeramTec AG Fabrikstrasse 23 29
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	CeramTec AG Fabrikstrasse 23 29
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hubert Wyzlic 2/14/97 864-682-1809

Date

Daytime Phone #

CR2E034 (9/96)