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

Mailing Address

STE 304

2300 W. SAMPLE ROAD

POMPANO BEACH FL 33073

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2300 W. SAMPLE ROAD

POMPANO BEACH FL 33073

STE 304

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 04 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000050949 (3)

PRUDENTIAL CHEMICAL, INC.

3. Date Incorporated or Qualified 06/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0605802 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 2ϕ Country This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) 82 TALLAHASSEE FL 32301-2525 83 84 City 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 nated of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETÉ Change 1.1 TITLE TIT) F GOLBERG, IRA NAME 1.2 NAME **550 SYLVAN AVENUE** STREET ADDRESS 1.3 STREET ADDRESS **ENGLEWOOD CLIFFS NJ 07632** CITY-ST-ZIP 14 CITY-ST-7IP DELETE Change Addition TITLE 2.1 TITLE REICH, TERRY NAME 2.2 NAME **550 SYLVAN AVENUE** STREET ADDRESS 2.3 STREET ADDRESS **ENGLEWOOD CLIFFS NJ 07632** CITY-ST-ZIP 2. 4 CITY - ST- ZIF DFLETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP 14. Thereby 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 supplied ental acqual 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 optrustee 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 or an attachment with an address?

TEMA Real

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