


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # 435472	
1. Entity Name OCEAN BIO-CHEM, INC.	

Principal Place of Business 4041 SW 47 AVE. FT. LAUDERDALE, FL 33314	Mailing Address 4041 SW 47 AVE. FT. LAUDERDALE, FL 33314
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DO NOT WRITE IN THIS SPACE



04212005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1564329	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DORNAU, PETER G
4041 SW 47 AVE.
FT. LAUDERDALE, FL 33314

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature for officer or partner of registered agent and holder of stock. NOTE: Registered Agent must sign and submit when fee is due.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

U00000340427
04/28/05 00117 014 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VD ANCHEL, EDWARD 4041 SW 47TH AVENUE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	SD TIEGER, JEFFREY 4041 SW 47TH AVE. FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PCD DORNAU, PETER 4041 SW 47 AVE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like employed.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR