## 2007 FOR PROFIT CORPORATION

## Apr 20, 2007 8:00 am Secretary of State **ANNUAL REPORT** 04-20-2007 90197 022 \*\*\*150.00 **DOCUMENT #497317** 1. Entity Name PET CHEMICALS, INC. DUUDIOO Principal Place of Business Mailing Address C/O COLGATE-PALMOLIVE CO. C/O COLGATE-PALMOLIVE CO. COMPANY TAX DEPT, 14TH FL-300 PARK AVE COMPANY TAX DEPT, 14TH FL-300 PARK AVE NEW YORK, NY 10022 NEW YORK, NY 10022 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02132007 CR2E034 (12/06) Chg-P Applied For City & State City & State 4, FEI Number 59-0752468 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. VD HILE ☐ Delete TITLE Addition HENDRY, ANDREW D NAME NAME STREET ADDRESS 300 PARK AVE. STREET ADDRESS NEW YORK, NY 10022 CITY-ST-ZIP CITY-ST-ZIP THEE ☐ Delete TITLE Change ☐ Addition MANTEL, JOAN L NAME NAME STREET ADORESS 300 PARK AVE. STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10022 CITY-ST-ZIP AS TITLE ☐ Delete TITLE Change Addition GILLMAN, NINA D NAME NAME STREET ADDRESS 300 PARK AVE. STREET ADDRESS CITY-S1-7P NEW YORK, NY 10022 CITY-ST-ZIP Delete 1111 F ☐ Change HILL Addition KAUFMAN, JULES P NAME NAME STREET ADDRESS 300 PARK AVE. STREET ADDRESS NEW YORK, NY 10022 CITY-ST-7IP City-St-70 Change ☐ Delete INTLE Addition TITLE Hector I. Erezuma 300 Park Ave. NAME ENEZNMA, HECTOR 300 PARKE AVE STREET ADDRESS STREET ADDRESS NEW YORK, NY 10022 CITY-S1-ZIP CITY-ST-ZIP New York, NY 10022 ☐ Delete HILE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**