2003 FOR PROFIT CORPORATION

Mar 24, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR 530788 DOCUMENT # 1. Entity Name 03-24-2003 90229 028 ***150.00 CLARIANT LIFE SCIENCE MOLECULES (PUERTO RICO) I NC. Principal Place of Business Mailing Address AIRPORT INDUSTRIAL PARK P O BOX 1466 Y A V U N U 4044 NE 54TH AVE GAINESVILLE FL 32602 GAINESVILLE FL 32609 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 66-0353903 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition MAHLER, JOACHIM NAME NAME **ROTHAUSSTRASSE 61** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MUTTENZ1, CH 4132 SW CITY-ST-ZIP TITLE VΡ ☐ Delete TITLE ☐ Change ☐ Addition NAME GOLDER, KEN NAME STREET ADDRESS 4000 MONROE ROAD STREET ADDRESS CITY-ST-ZIP CHARLOTTE NC 28205 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MEIER, HEINER NAME STREET ADDRESS **4000 MONROE ROAD** STREET ADDRESS CITY-ST-ZIP CHARLOTTE NC 28205 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME BARNARD, CHRIS NAME STREET ADDRESS 4000 MONROE RD STREET ADDRESS CITY-ST-ZIP CHARLOTTE NC 28205 CITY-ST-7IP Delete Change ☐ Addition **BRANDENBERG, PETER** NAME STREET ADDRESS ROTHAUSSTRASSE 61 STREET ADDRESS CITY-ST-ZIP MUTTENZ 1, CHR 4132 SW CITY-ST-ZIP TITLE Delete TITLE Change Addition MIYASAKI, HELEN NAME NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 an address, with all other like empowered

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

4044 NE 54TH

GAINESVILLE FL 32609

STREET ADDRESS

CITY-ST-ZIP

FILED