2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#816646

Entity Name: SIKA CHEMICAL CORPORATION

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 201 POLITO AVE LYNDHURST, NJ 07071 US **Current Mailing Address: New Mailing Address:** 201 POLITO AVE LYNDHURST, NJ 07071 US FEI Number: 22-1594831 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LUMLEY, JACQUELINE Name: Name: 201 POLITO AVENUE Address: Address: City-St-Zip: LYNDHURST, NJ 07071 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition ROSENBERG, STEVE Name: Name: 201 POLITO AVENUE Address: Address: LYNDHURST, NJ 07071 City-St-Zip: City-St-Zip: Title: Title: CFO () Delete () Change () Addition GILL, STEVE Name: Name: 201 POLITO AVENUE Address: Address: City-St-Zip: LYNDHURST, NJ 07071 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition HARMS, STEPHEN D Name: Name: Address: 201 POLITO AVENUE Address: City-St-Zip: LYNDHURST, NJ 07071 City-St-Zip: Title: Title: () Delete () Change () Addition BARTSCHI, ERNEST Name: Name: 201 POLITO AVE. Address: Address: City-St-Zip: LYNDHURST, NJ 07071 City-St-Zip: Title: CEO () Delete Title: () Change () Addition SCHULER, PAUL Name: Name: 201 POLITO AVENUE Address: Address: City-St-Zip: City-St-Zip: LYNDHURST, NJ 07071

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE GILL CFO 01/13/2009