

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 02, 2000 8:00 am**  
**Secretary of State**

08-02-2000 90156 021 \*\*\*150.00

**DOCUMENT # 817268**

1. Entity Name  
**CHEMROCK CORPORATION**

Principal Place of Business  
**4269 EDGEWOOD DR  
 JAX FL 32254  
 US**

Mailing Address  
**23705 CRENSHAW BLVD  
 STE 101  
 TORRANCE CA 90505  
 US**

2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip

4. FEI Number **62-1622370**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO PERLMAN, RAYMOND G 225 CITY AVENUE BALA CYNVD PA</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V WAUGH, W. H. 7 PEACH BLOSSOM NASHVILLE TN</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP KATZ, BARRY 225 CITY AVENUE BALA CYNWYD PA</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S MYERS, D. M. 104 EDGEBROOK ROAD GOODLETTSVILLE TN</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>SECRETARY MICHAEL CONLEY 225 CITY AVE., BALA CYNWYD, PA</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>ASS'T TREASURER ZENAIDA S. YOLO 23705 CRENSHAW BLVD., SUITE 101 TORANCE, CA 90505</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like reported.

SIGNATURE: *Signature*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 7/26/00 Daytime Phone #: (310) 517-0700

CR2E034 (5/00)

Attachment  
DT 817268

**DICALITE™**

D0076009

Chemrock Corporation  
23705 Crenshaw Blvd., Suite 101  
Torrance, CA 90505

Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314

24-Jul-2000

Re: 2000 Uniform Business Report  
Document #817268

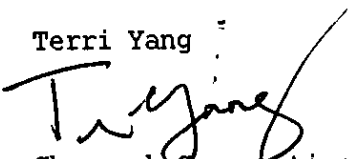
Dear Sir,

Enclosed please find 2000 UBR filing with amount due for \$150.00. The original report form that your department sent out back in January 2000 was never received. Pursuant to the telephone conversation with your dept. this morning that because thousands have called in for the same problem, the department will accept \$150.00 with letter attached and waive the late fee.

Please contact us if you have any further questions.

Sincerely,

Terri Yang



Chemrock Corporation  
Accounting Manager  
(310)517-0700