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Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **832025** (1)
1. Corporation Name
OXY CHEMICAL CORPORATION

Principal Place of Business 5005 LBJ FREEWAY DALLAS TX 75244 US	Mailing Address P.O. BOX 300 ATTN STATE TAX TULSA OK 74102-0300 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/21/1974	
4. FEI Number 95-2813195	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	PD HIRL, J.R.
STREET ADDRESS	5005 LBJ FREEWAY
CITY - ST - ZIP	DALLAS TX
TITLE	<input type="checkbox"/> DELETE
NAME	VPAS PETERSON, L
STREET ADDRESS	10889 WILSHIRE BLVD
CITY - ST - ZIP	LOS ANGELES CA
TITLE	<input type="checkbox"/> DELETE
NAME	AS ROSS, D.G.
STREET ADDRESS	110 WEST 7TH ST.
CITY - ST - ZIP	TULSA OK
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	AT GREEN, SHELLEY D
STREET ADDRESS	10889 WILSHIRE BLVD.
CITY - ST - ZIP	LOS ANGELES CA
TITLE	<input type="checkbox"/> DELETE
NAME	VPSD MCDOLE, K. C
STREET ADDRESS	5005 LBJ FREEWAY
CITY - ST - ZIP	DALLAS TX 75244
TITLE	<input type="checkbox"/> DELETE
NAME	AS ROMNESS, M.D.
STREET ADDRESS	5005 LBJ FREEWAY
CITY - ST - ZIP	DALLAS TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	VP/T DAVID C. YEN
4.3 STREET ADDRESS	10889 WILSHIRE BLVD
4.4 CITY - ST - ZIP	LOS ANGELES CA 90024
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

CERTIFIED MAIL # **038843**

DATE MAILED **APR 09 1998**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

David G. Ross

DAVID G. ROSS

4/7/98

(918) 561-3497

CR2E034 (10/97)