## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT #834430** 

1. Entity Name

INDUSTRIAL CHEMICALS, INC.



Principal Place of Business

INDUSTRIAL CHEMICALS, INC 2042 MONTREAT DRIVE BIRMINGHAM, AL 35216 Mailing Address

INDUSTRIAL CHEMICALS, INC PO BOX 660688 BIRMINGHAM, AL 35266 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

05 JAN 12 PM 1:07



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01062005 No Chg-P

CR2E034 (10/03)

4. FEI Number 63-0583643 Applied For Not Applicable

5. Certificate of Status Desired

2

\$8.75 Additional Fee Required

THE MDA GROUP, INC. 5416 HIGHWAY 98 WEST SANTA ROSA BEACH, FL 32459

## DO NOT WRITE IN THIS SPACE

			,	
	named entity submits this statement for the piions of registered agent.	ourpose of changing its register	ed office or registered agent, or both,	, in the State of Florida. I am familiar with, and accept
SIGNATURE.				
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registere	od Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				
10.	OFFICERS AND DIREC	CTORS	J	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WELCH, WILLIAM L. 2042 MONTREAT DRIVE B'HAM, AL 35216			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B'HAM, AL 35216		200045107542 01/20/0501043011 **158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby	certify that the information supplied with this fi	ling does not qualify for the exe	emption 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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

WILLIAM L WELCH

1/6/2005

(205) 823-7330

Dale

Daytime Phone #