

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2003 8:00 am
Secretary of State

02-11-2003 90083 005 ***150.00

DOCUMENT # 838677

1. Entity Name
HELENA CHEMICAL COMPANY



Principal Place of Business
**225 SCHILLING BLVD
SYE 300
COLLIERVILLE TN 38107**

Mailing Address
**225 SCHILLING BLVD
SYE 300
COLLIERVILLE TN 38107**



2. Principal Place of Business
**225 Schilling BLVD
Suite, Apt. #, etc.
Suite 300**

3. Mailing Address
**225 Schilling BLVD
Suite, Apt. #, etc.
Suite 300**

☐ CHECK HERE IF MAKING CHANGES

City & State
Collierville, TN.
Zip
38107 Country
USA

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Collierville TN
Zip
38107 Country
USA

4. FEI Number **71-0293688**

Applied For
Not Applicable

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

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. 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
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCOB TOYODA, YOSHIYA 450 LEXINGTON AVE. NEW YORK NY 10017 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO MCCARTY, MIKE 225 SCHILLING BLVD COLLIERVILLE TN 38107 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAITO, SHINICHI 450 LEXINGTON AVE. NEW YORK NY 10017 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO TRAXLER, TROY D., JR. 6075 POPLAR AVE MEMPHIS TN <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POSHIO, SCHINIZU 225 SCHILLING COLLIERVILLE TN 38107 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCOB Kazuhiko Sakamoto 450 Lexington Ave. New York, NY. 10017 <input type="checkbox"/> Change <input checked="" 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	D Toru Nishimi 450 Lexington Ave. New York, NY. 10017 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO TRAXLER, TROY D., JR. 225 Schilling BLVD Collierville, TN 38107 <input checked="" 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	D. SHIMIZU, TOSHIO 225 Schilling BLVD Collierville, TN. 38107 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Troy Traxler* **RECEIVED** *Troy Traxler* *2/5/03* *901 537 7206*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0085710 AB

CR2E034 (10/02)