FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996 1-26-96 B- 0309

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS C

DOCUMENT # **839171** (6)

1. Corporation Name

DEGUSSA CORPORATION

Principal Place of Business
65 CHALLENGER ROAD
RIDGEFIELD PARK NJ 07660

Mailing Address
65 CHALLENGER ROAD
RIDGEFIELD PARK NJ 07660

3. Date Incorporated or Qualified: 09/22/1977
3a. Date of Last Report: 09/15/1995

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

4. FEI Number: 63-0673043 — Applied For / Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

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 _____ (NOTE: Registered Agent signature required when filing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	EVD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MANNSFELD, SVEN-PETER	1.2 NAME	
STREET ADDRESS	PO BOX 606 J, NA	1.3 STREET ADDRESS	
CITY-ST-ZIP	THEODORE AL	1.4 CITY-ST-ZIP	
TITLE	CD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BUFE, UWE-ERNST, DR.	2.2 NAME	
STREET ADDRESS	65 CHALLENGER ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	RIDGEFIELD PARK NJ	2.4 CITY-ST-ZIP	
TITLE	VS ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	TAYLOR, DENNIS	3.2 NAME	
STREET ADDRESS	65 CHALLENGER RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	RIDGEFIELD PARK NJ 07660	3.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	BURKE, ANDREW J.	4.2 NAME	
STREET ADDRESS	65 CHALLENGER ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	RIDGEFIELD PARK NJ	4.4 CITY-ST-ZIP	
TITLE	VT ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	ZEHNDER, MARY ROSE	5.2 NAME	
STREET ADDRESS	65 CHALLENGER ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	RIDGEFIELD PARK, NJ	5.4 CITY-ST-ZIP	
TITLE	PD ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	WAGNER, HEINZ-JOACHIM	6.2 NAME	
STREET ADDRESS	65 CHALLENGER ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	RIDGEFIELD PARK, NJ	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: V.P. & CFO — 1/18/96 — (201) 641-6100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Uwe Salzer

CR2E034 (12/95)