2002 Uniform Business Report (UBR)

Mar 19, 2002 8:00 am 839171 DOCUMENT # **Secretary of State** 1. Entity Name **DEGUSSA CORPORATION** 03-19-2002 90024 017 ***150.00 Mailing Address Principal Place of Business 379 INTERPACE PARKWAY 379 INTERPACE PARKWAY PARSIPPANY NJ 07054-0677 PARSIPPANY NJ 07054-0677 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 63-0673043 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **OFFICERS AND DIRECTORS** 12. 11. President/Director Change ★ Addition CR2E034 (9/01 EVPD-X Delete TITLE TITLE O'BRIEN, PAUL SAMSON: MARC: NAME NAME 379 INTERPACE PKWY. STREET ADDRESS -379-INTERPACE PARKWAY STREET ADDRESS PARSIPPANY, NJ 07054 PÁRSIPPANY NJ 07054-0677 CITY-ST-ZIP CITY-ST-ZIP X1 Addition Change ☐ Delete COB TITLE **VPSD** TITLE FELCHT, UTZ_HELLMUTH TAYLOR, DENNIS J NAME NAME STREET ADDRESS 379 INTERPACE PARKWAY STREET ADDRESS BENNIGSENPLATZ 1 CITY-ST-ZIP CITY-ST-ZIP PARSIPPANY NJ 07054-0677 40474 DUSSELDORF, GERMANY Addition [7] Change TITLE DPC Delete DIRECTOR TITLE NAME BURKE, ANDREW J. NAME KOLLMEIER, HANS-JOACHIM STREET ADDRESS STREET ADDRESS 379 INTERPACE PARKWAY GOLDSCHMIDTSTRASSE 100 CITY-ST-7IP CITY-ST-ZIP PARSIPPANY NJ 07054-0677 45127 ESSEN, GERMANY ☐ Change Addition ☐ Delete TITLE TITLE DIRECTOR ZEHNDER, MARY ROSE NAME NAME OBERHOLZ, ALBERT STREET ADDRESS STREET ADDRESS 379 INTERPACE PARKWAY BENNIGSENPLATZ 1 CITY-ST-ZIP CITY-ST-ZIP Parsippany nj 07054-0677 <u>40474 DUSSELDORF, GERMANY</u> Addition Change ☐ Delete TITLE COB: DIRECTOR WAGNER, HEINZ-JOACHIM NAME RUTER, JORN STREET ADDRESS STREET ADDRESS BENNINGSENPLATZ 1. PAUL-BAUMANN-STRAUBELL DUESSELDORF, GERMANY 40474 CITY-ST-ZIP CITY-ST-ZIP D-45764. MARL. GERMANY Change ★ Addition TITLE DIRECTOR TITLE Delete schmidt, karl j NAME NAME SCHOENEBERG, THOMAS STREET ADDRESS 379 INTERPACE PARKWAY STREET ADDRESS BENNIGSENPLATZ 1 PARSIPPANY NJ 07054-0677 40474 DUSSELDORF, GERMANY CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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

SIGNATURE:

SIGNATURE AND TYPE

changed, or on an attachment with an address, with all other like empowered.

Dennis J.

FILED