

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90001 031 \*\*\*150.00

DOCUMENT # 850209

1. Corporation Name ALLIED CHEMICAL CORPORATION

Principal Place of Business 101 COLUMBIA RD P.O. BOX 1057 - TAX DEPT MORRISTOWN NJ 07962

Mailing Address 101 COLUMBIA RD P.O. BOX 1057 - TAX DEPT MORRISTOWN NJ 07962



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/01/1981

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

4. FEI Number 22-2338767 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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324

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	VSD	<input type="checkbox"/> DELETE
NAME	PATRICK, VICTOR P	
STREET ADDRESS	101 COLUMBIA RD	
CITY-ST-ZIP	MORRISTOWN NJ 07962	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SINAIKIN, RONALD A	
STREET ADDRESS	101 COLUMBIA RD	
CITY-ST-ZIP	MORRISTOWN NJ 07962	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MARSHALL, DENNIS R.	
STREET ADDRESS	101 COLUMBIA ROAD	
CITY-ST-ZIP	MORRISTOWN NJ 07962	
TITLE	T	<input type="checkbox"/> DELETE
NAME	GAMBLE, JOHN J	
STREET ADDRESS	101 COLUMBIA ROAD	
CITY-ST-ZIP	MORRISTOWN NJ 07962	
TITLE	AVP	<input type="checkbox"/> DELETE
NAME	BROWNSTEIN, PAUL	
STREET ADDRESS	101 COLUMBIA RD	
CITY-ST-ZIP	MORRISTOWN NJ 07962	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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		

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, with all other like empowered.

SIGNATURE: Paul Brownstein REQUIRSTA. Brownstein 1/8/99 973-455-5123  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

244904-90001-31  
850209

01/06/99

Officers and Directors - Business Address

Allied Chemical Corporation

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Paul Brownstein	Assistant Vice President-Taxes	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
John Gamble Jr.	Treasurer	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
Dennis Marshall	Director President	AlliedSignal Inc. 101 Columbia Road Morristown, -NJ-07962
Victor Patrick	Director Vice President and Secretary	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
Ronald Sinaikin	Vice President-Taxes	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962