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

CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1998

(3)

CHEMICAL DESIGN COMPANY, INC.

**FILED** Apr 30 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						T TABLISH LIND ISONE EDLAK DILAK INDI NODI AIDIN DIDIN DI	YAL BIRKH RADI	I BIBIT EDDE
12257 SW 130 STREET 12257 SW 130 STREET MIAMI FL 33186 MIAMI FL 33186					DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified		
						04/06/1981		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	<del></del>	oplied For
Suite, Apt.	# etc	Suite, Apt. #, etc.				59-2104585		ot Applicable
22		27				5. Certificate of Status Desired	\$8.75 / Fee Re	
City & Stat	28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip	Country	Zip	Country			8. This corporation owes or has paid the curre	nt year Int	angible
24	25 29 30				Personal Property Tax due June 30. X Yes No			
	9. Name and Address of Curre	nt Registered Agent		241		10. Name and Address of New Registered Ag	ent	
	UBER, PETER G			81	Name			
9100 S. DADELAND BLVD. SUITE 910 ONE DATRAN CENTER				82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
	MI FL 33186-7815			83				
				84	City		<b>85</b> Zip (	Code
44 0	10 10 10 10 10 10 10 10 10 10 10 10 10 1	NO. LOGILICO EL LA			····	FL		
I OTHER OF F	egistered agent, or both, in the State m familiar with, and accept the oblig	eof Florida. Such charige was a	authorized	lbν	the corporatio	oration submits this statement for the purpose of consists board of directors. I hereby accept the appoint	nanging it ntment as	s registered registered
SIGNATURE								
12.	Signature, typed or printed name of registered age OFFICERS AN	<del></del>	t. Registored	Agen	d signature required	ADDITIONS/CHANGES TO OFFICERS AND D	IDECTOR	CIN 37
TITLE	PD	DELETE	1.1 TITLE				Change	Addition
NAME	KANTROWITZ, JACK	_	1.2 NA			_	<b>J</b> 0/10.190	
STREET ADDRESS	7430 SW 131 ST.		1.3 STREE		ADDRESS			3
CITY-ST-ZIP	MIAMI FL		1.4 CITY-		- ZIP			
TITLE	V	DELETE	2.1 TIT				Change	Addition
NAME	KUMMELMAN, CAREY		2.2 NA	ME				
STREET ADDRESS	10091 S.W. 138 COURT		2.3 ST	REET A	ADDRESS			
CITY-ST-ZIP	MIAMI FL		2. 4 CI	1Y-S1	r-ZIP			
TITLE		☐ DELETE	3.1 TIT	LÉ		Ţ.	Change	Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	reet a	odress			
CITY-ST-ZIP			3.4. CI		- ZIP		-	
TITLE		☐ DELETE	4.1 TIT			L	<b>j</b> Change	☐ Addition
NAME			4. 2 NA					
STREET ADORESS					DORESS			
CITY-ST-ZIP TITLE	· -	DELETE	4.4 CIT	· · · · ·	- ZIP		1 05	12200
NAME		_ bittle	5.1 TIT 5.2 NA			L	Change	Addition
STREET ADDRESS					DDRESS			
CITY-ST-ZIP								
TITLE	71.75	☐ DELETE	5.4 CIT 6.1 TIT		- 7.11		Change	Addition
NAME			6.2 NA				) CHAHÎC	A008(0))
STREET ADDRESS					DDRESS			
CITY-ST-ZIP					l l			
de l'hereby e	- 436 31 - 4 41 - 3 4	20 11 12 12	6.4 CIT	1-31-	LH .			

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 of 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 il charged, or or an attachment with an address.