

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 24, 1998 8:00 am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F93000001531 (3)

1. Corporation Name
RHONE-POULENC SURFACTANTS & SPECIALTIES, INC.

Principal Place of Business
**CN 7500, PROSPECT PLAINS RD
 CRANBURY NJ 08512-7500**

Mailing Address
**CN 5266
 PRINCETON NJ 08543-5266**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03/29/1993		22-3025453		Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
Zip		Zip		28 Cranbury, NJ		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Country		Country		29 08512		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
D	FORTE, PHIL CN 7500 PROSPECT PLAINS RD CRANBURY NJ	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
AS	SAVIANO, ANTHONY CN 5266 PRINCETON NJ	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D	ECKERT, DAVID D CN 7500 PROSPECT PLAINS RD CRANBURY NJ	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP	JONGEWARD, CHUCK CN 7500 PROSPECT PLAINS RD CRANBURY NJ	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P	ECKERT, DAVID D CN 7500 PROSPECT PLAINS RD CRANBURY NJ	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S	IATESTA, JOHN M CN 5266 PRINCETON NJ	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: JOHN M. IATESTA **SIGNATURE REQUIRED** Date: September 14, 1998 Daytime Phone #: (609) 860-4374

CR2E034 (5/98)