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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000005842 (0)

CYTEC INDUSTRIES INC.

FILED May 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 5 GARRET MOUNTAIN PLAZA 5 GARRET MOUNTAIN PLAZA WEST PATERSON NJ 07424 WEST PATERSON NJ 07424 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/23/1993 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 22-3268660 Not Applicable 21 26 Suite, Apt #, etc \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zφ This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 25 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 84 Zip Code City 85 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 Ager I signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE 1,1 TITLE Change TITLE LILLEY, DAVID 1.2 NAME CR2E034 NAME FIVE GARRET MOUNTAIN PLAZA STREET ADDRESS 1.3 STHEET ADDRESS W. PATERSON NJ 1.4 CHTY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 2.1 TITLE **BURNS, GENE A** NAME 2.2 NAME 560 SYLVAN AVE. STREET ADDRESS 2.3 STREET ADDRESS ENGLEWOOD CLIFFS NJ 07632-3104 City-ST-ZIP 2 4 CITY - ST - 7/P DELETE Addition TITLE 3.1 THILE ARMSTRONG, FREDERICK W NAME 3.2 NAME 477 PAUL AVE. 3.3 STREET ADDRESS STREET ADDRESS **ALLENDALE NJ 07401** CITY-ST-ZIP 34. CHY-S1-7IP DELETE Change Addition 4.1 TITLE TITLE 200002532602 -05/22/98--01011--02**5/** POWELL, WILLIAM P 4. 2 NAME NAME 535 MADISON AVE. 4.3 STREET ADDRESS STREET ADDRESS ***150.00 **NEW YORK NY 10022** 4.4 CITY-ST-ZIP CITY-ST-7/P Addition DELETE 5 1 TITLE CRONIN, JAMES P 5.2 NAME NAME FIVE GARRET MOUNTAIN PLAZA 5.3 STREET ADDRESS STREET ADDRESS WEST PATERSON NJ 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 6.1 TITLE Change TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby corlify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. I further certify that the information indicated on this annual report or suppliemental 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 Statutos; and that my name appears in Block 12 or Block 13 if changed, orgonin attachment with an address.