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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

F94000004678 (8) DOCUMENT #

CLESTRA CLEANROOM, INC.

Principal Place of Business	Mailing Address
7000 PERFORMANCE DR	7000 PERFORMANCE DR
NORTH SYRACUSE NY 13212	NORTH SYRACUSE NY 13212
US	US

FILED Jun 04 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/09/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 16-1211906 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CT CORPORATION SYSTEM Name 1200 S. PINE ISLAND RD. 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 в3 85 Zip Code 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE\_Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE DOUAY, MICHEL NAME 1.2 NAME **2 RUE MOZART** STREET ADDRESS 1.3 STREET ADDRESS **GRIESHEIM SUR SOUFFEL FRANCE** CITY-ST-ZIP 1.4 CITY - \$1 - ZIP **PCEO** DELETE Change Addition TITLE 21 THUE BIKARD, JEAN L 22 NAME NAME **56 RUE JEAN GIRAUDOUX** STREET ADDRESS 2.3 STREET ADDRESS **67000 STRASBOURG FRANCE** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change LARSEN, TRACY NAME 3.2 NAME 3566 WESTCOTT STREET ADORESS 3.3 STREET ADDRESS **GRAND RAPIDS MI 49536** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 THILE **BRIGG, SUE** 4. 2 NAMÈ NAME 1405 ALLEN RD STREET ADDRESS 4.3 STREET ADDRESS NO SYRACUSE NY CITY-ST-ZIP 4.4 CITY - ST - ZIP OFFICER /CONTROLLER DELETE Addition Change TITLE 5.1 TITLE NAME THOMAS 52 NAME EST OAK ROME STREET ADDRESS 5.3 STREET ADDRESS 13440 CITY-ST-ZIP 5.4 CHY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 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 trusted 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 atte

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