**FILED** 

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90091 047 \*\*\*150.00

## 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

## DOCUMENT # F9400006615 Corporation Name

BENGAL CHEMICAL, INC.

Principal Place	e of Business	Mailing Address			4 IBBIISS HIS 1814 BLES BRITE SBITE SALLS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
13739 AIRLINE HWY BATON ROUGE LA 70817		13739 AIRLINE HWY BATON ROUGE LA 70817 US		DO NOT WRITE IN TH	IS SPACE		
US		US			3. Date Incorporated or Qualifed 12/27/1994		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21	ide of Basiness	26			72-1276055	Not	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>\$8.75</b> A Fee Rec		
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 to Added to	,
Zip	Country	Zip	Country		8. This corporation owes the current year		
24	25	29 30	0		Personal Property Tax.		□No
	9. Name and Address of Curren	nt Registered Agent	-   04		10. Name and Address of New Registere	d Agent	
40	r rn			Name	·		
A.C.C. CO. 200 S. ORANGE AVE., #2300			82 Stre		ess (P.O. Box Number is Not Acceptable)		
ORL	ANDO FL 32801		83				•
			84	City		85 Zip C	Code
11 0	to the Suiting of Soutions 607 050	12 and 607 1508 Florida Statutes	the above-	named corn	aretian submits this statement for the numose	of changing its	registered
office or r	to the provisions of Sections 607.050 registered agents or both, in the State im/familiar with approaception engine	of Florida. Such change was auth titions of, Section 607.0505, Florid	horized by the Statutes.	ne corporation	on's board of directors. I hereby accept the app	oointment as reg	gistered
		<del>/</del>			1/0	600	
SIGNATURE	IX MINISTER	20-				199	
	Inguiting, typed printed name of registered age	nt and title if applicable. (NOTE: Ro			1/8	193	
SIGNATURE	Inguiting, typed printed name of registered age	20-	egistered Agent :		d when reinstating) DATE	193	
SIGNATURE	grature, types printed name of registered age OFFICERS AN	nt and title if applicable. (NOTE: RI	egistered Agent :		d when reinstating) DATE	AND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME	proture, types printed name of registered age OFFICERS AN PTD LE BLANC, ROBERT	nt and title if applicable. (NOTE: RI	egistered Agent s  13.  1.1 TITLE	signature require	d when reinstating) DATE	AND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	OFFICERS AN PTD LE BLANC, ROBERT 13739 AIRUNE HWY	nt and title if applicable. (NOTE: RI	egistered Agent : 13. 1.1 TITLE 1.2 NAME	signature require	d when reinstating) DATE	AND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME	proture, types printed name of registered age OFFICERS AN PTD LE BLANC, ROBERT	nt and title if applicable. (NOTE: RI	13. 1.1 TITLE 1.2 NAME 1.3 STREET A	signature require	d when reinstating) DATE	AND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AN PTD LE BLANC, ROBERT 13739 AIRUNE HWY	nt and title if applicable. (NOTE: Ri ND DIRECTORS	egistered Agent s  13.  1.1 TITLE  1.2 NAME  1.3 STREET A  1.4 CITY-ST-	ADDRESS ZIP	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS  ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PTD LE BLANC, ROBERT 13739 AIRLINE HWY BATON ROUGE LA 70817	nt and title if applicable. (NOTE: Ri ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE	ADDRESS ZIP CADDRESS ADDRESS	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS  ADDITIONS/CHANGES TO OFFICERS  COO  CHOLAS GODIEY  3739 A.R.L Hwy	AND DIRECTO Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PTD LE BLANC, ROBERT 13739 AIRLINE HWY BATON ROUGE LA 70817	nt and title if applicable. (NOTE: Ri ND DIRECTORS	egistered Agent :  13. 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 2.2 NAME	ADDRESS ZIP CADDRESS ADDRESS	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS  ADDITIONS/CHANGES TO OFFICERS  COO  CHOLAS GODIEY  3739 A.R.L Hwy	AND DIRECTO Change	RS IN 12 Addition
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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 Clapter 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS