

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000003886 (7)

1. Corporation Name
PHIBRO INC.



Principal Place of Business 500 NYALA FARMS WESTPORT CT 06880	Mailing Address 28TH FLOOR TAX DEPT C/O SOLOMAON BROTHERS 7430 NEW YORK NY 10048
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/11/1995	
21. Suite, Apt. #, etc.		26. Soloman Brothers		4. FEI Number 06-1429126	Applied For Not Applicable
22. City & State		27. 250 West St. Tax Dept. 9th fl		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip	Country	28. New York, NY		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. 10013	30. Country	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 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	85. Zip Code FL

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	
TITLE	DC	1.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DENHAM, ROBERT E	1.2 NAME	
STREET ADDRESS	7 WORLD TRADE CENTER	1.3 STREET ADDRESS	DEVP Patty John 500 Nyala Farms Westport, CT 06880
CITY-ST-ZIP	NEW YORK NY 10048	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, ANDREW J	2.2 NAME	
STREET ADDRESS	500 NYALA FARMS	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESTPORT CT 06880	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NAGY, GERALD	3.2 NAME	YP Blumenthal David 500 Nyala Farms Westport, CT 06880
STREET ADDRESS	7 WORLD TRADE CENTER	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10048	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTELLANO, MICHAEL N	4.2 NAME	
STREET ADDRESS	500 NYALA FARMS	4.3 STREET ADDRESS	
CITY-ST-ZIP	WESTPORT CT 06880	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRONIN, WILLIAM J	5.2 NAME	
STREET ADDRESS	500 NYALA FARMS	5.3 STREET ADDRESS	
CITY-ST-ZIP	WESTPORT CT 06880	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCAVITY, MALCOLM	6.2 NAME	
STREET ADDRESS	500 NYALA FARMS	6.3 STREET ADDRESS	
CITY-ST-ZIP	WESTPORT CT 06880	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 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:

William Cronin

April 1998

CR2E034 (10/97)