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

FILED

May 15 1998 8:00am

Secretary of State

1998
DOCUMENT #

F9600001692 (0)

PRECIOUS CHEMICALS U.S.A. INC.

Principal Place	e of Business	Mailing Address	Mailing Address			I JABANDO TULE KAND EKIN BENIN BENIN BENIN BANK BANK BAND BULLE KAND IKAK KADA
,			2957 STATE RD 434			
2957 STATE RD 434 100			100			
LONGWOOD FL \$2779		LONGWOOD FL 32779				DO NOT WRITE IN THIS SPACE
US		US	US			3. Date Incorporated or Qualified
						04/04/1996
· ·	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				06-1210732 Not Applicable
Suite, Apt. #, etc.		· ·	Suite, Apt. #, etc .			5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State		<u>├</u>	City & State			6. Election Campaign Financing \$5.00 May Be
23	Country	28 Zip	Cour	ntev.		Trust Fund Contribution Added to Fees
Zìp	₁			шу		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 Name and Address of Curren	1 Penistered Agent	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
						ID. Hallie Bild Addition of Non Hogisterou Agent
	ZARA, LOUIS					
2957 STATE ROAD 434 SUITE 100			82 Street Ad		Street Ad-	ddress (P.O. Box Number is Not Acceptable)
	NGWOOD FL 32779		}	83		
ון	MOMOOD FL 32178		- 1			
			[84	City	FL 85 Zip Code
44 Parrement	to the providing of Sections 607.000	2 and COZ 1500 Clarida Statu	itee the ab		named co	
office or re	egistered applit, or both, in the State	of Horida, Such chango was	authorized	by t	he corpor	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
agent. Lam familiar yitth, and accept the oblightions of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, Word or product nurse of registered appeals of the flagsplants (NOTE Registered Agent signature requires when reinstating) DATE						
12.	Standure, vised or protect name of registered age OFFICERS ANI		13.	Militar	signatura in d	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CPD	DELETE	1.1 10	LÉ		Change Addition
NAME	SHOHER, ITZHAK DR		1.2 NA		'	Louis M. Azzara 2957 S.R. 434 Sile loo Logural, FL 2957 S.R. 434 Sile loo Logural, 32779
STREET ADDRESS	9 GALGALEI HAPLADADA ST				DDRESS	Louis M. HZZLIZ
CITY-ST-ZIP	HERZLIA 46722 ISRAEL			Y- \$1	7(0	2957 S.R. 434 Side los months 122779
TITLE	VCVD	DELETE		2.1 TITLE		Change Addition
NAME	WHITEMAN, AHRON		2.2 NA			_ • _
STREET ADDRESS	4A H APAPPE AT		1		DORESS	
CITY-ST-ZIP	PETACH TIKVA ISRAEL					
TITLE	8	DELETE		2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	LIEBERSTEIN, EUGENE	_	3.2 NA			
STREET ADDRESS	2151 LONG RIDGE RD				DORESS	
CITY-ST-ZIP	STAMFORD CT 06903		3.4. CI			
TITLE		DELETE			-11	Change Addition
NAME			4. 2 NA			
STREET ADDRESS			•		DORESS	
CITY-ST-ZIP				Y- \$1		•
TITLE		DELETE	5.1 7(1		=:'	Change Addition
NAME		<u></u>	5.2 NA			
STREET ADDRESS					DORESS	
•						
CMY-ST-ZIP TALE		DELETE	5.4 CITY-ST-ZIP 6 1 TITLE		LIF	☐ Change ☐ Addition
NAME		المام	6.2 NAME			
STREET ADDRESS					DORESS	
}					1	
14. I hereby c	ertify that the information supplied wi	th this filing does not qualify	6.4 CIT for the exe			in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated	on this annual report on supplementa	l annual report is true and ac	curate and	that	my signar	ature 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 attactment with an addition.						
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