


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 06, 2004 08:00 AM
Secretary of State

DOCUMENT # F96000001692 1. Entity Name PRECIOUS CHEMICALS U.S.A. INC.	
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Principal Place of Business 250 ALTAMONTE COMMERCE BLVD ALTAMONTE SPRINGS, FL 32714 US	Mailing Address 250 ALTAMONTE COMMERCE BLVD ALTAMONTE SPRINGS, FL 32714 US
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DO NOT WRITE IN THIS SPACE



07022004 No Chg-P CR2E034 (10/03)

4. FEI Number 06-1210732	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**AZZARA, LOUIS
250 ALTAMONTE COMMERCE BLVD
ALTAMONTE SPRINGS, FL 32714**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Louis Azzara* (NOTE: Registered Agent signature required when reinstating) DATE: 7/2/04

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD SHOHER, ITZHAK DR 9 GALGALEI HAPLADADA ST HERZLIA 46722 ISRAEL,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVD WHITEMAN, AHRON 13 JI PERETZ ST PETACH TIKVA ISRAEL,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LIEBERSTEIN, EUGENE 2151 LONG RIDGE RD STAMFORD, CT 06903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO AZZARA, L M 250 ALTAMONTE COMM. BLVD. ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AZZARA, NICK 250 ALTAMONTE COMM. BLVD. ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000163329
07/06/04-800019-003 150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Louis Azzara* Louis Azzara, CEO 7/2/04 407-889-8891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #