

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

FILED

Mar 17 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 # F96000004559 (8)

1. Corporation Name
T3R4 SPECIALTIES LTD., INC.

Principal Place of Business - OK
133 WOOD COVE
COVENTRY RI 02816

Mailing Address
133 WOOD COVE
COVENTRY RI 02816



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 133 WOOD COVE 22 COVENTRY RI 02816		2a. Mailing Address 27 133 WOOD COVE 28 COVENTRY RI 02816		3. Date Incorporated or Qualified 09/05/1996	
21 133 WOOD COVE 22 COVENTRY RI 02816		27 133 WOOD COVE 28 COVENTRY RI 02816		4. FEI Number 05-0491072	
21 133 WOOD COVE 22 COVENTRY RI 02816		27 133 WOOD COVE 28 COVENTRY RI 02816		5. Certificate of Status Desired \$8.75 Additional Fee Required	
21 133 WOOD COVE 22 COVENTRY RI 02816		27 133 WOOD COVE 28 COVENTRY RI 02816		6. Election Campaign Financing Trust Fund Contribution	
21 133 WOOD COVE 22 COVENTRY RI 02816		27 133 WOOD COVE 28 COVENTRY RI 02816		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	

9. Name and Address of Current Registered Agent CONNEALLY, DANIEL P 210 S. PINELLAS AVE. TARPON SPRINGS FL 34689		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	
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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: Daniel P. Conneally
3/5/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS CONNEALLY, DANIEL F 133 WOOD COVE COVENTRY RI 02816	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CONNEALLY, ALICE M 133 WOOD COVE COVENTRY RI 02816	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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)(l), 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: Daniel P. Conneally
3/8/98 401-823-7327

CR2E034 (10/97)