

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H62275 (3)

1. Corporation Name

CHEM-TECH GROUP, INC.



Principal Place of Business

Mailing Address

323 N E 2ND AVENUE
DELRAY BEACH FL 33444
US

P O BOX 2689
DELRAY BEACH FL 33444
US

3. Date Incorporated or Qualified
06/17/1985

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 2300 CORPORATE BLVD N.W.

26 2300 CORPORATE BLVD NW

4. FEI Number

59-2574998

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #132

27 #132

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23 BOCA RATON FL

28 BOCA RATON FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33431

25 U.S.

29 33431

30 U.S.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAJAUJIS, FRANK
323 N E 2ND AVE
DELRAY BEACH FL 33444

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2300 CORPORATE BLVD. N.W.

83 SUITE 132

84 City

BOCA RATON

FL

85 Zip Code

33431

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 fee, if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

(SIGNED HERE IN ERROR)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME PAJAUJIS, FRANK
STREET ADDRESS 7699 ESTRELLA CIRCLE
CITY - ST - ZIP BOCA RATON FL

TITLE DVT
NAME HOWER, ALAN
STREET ADDRESS 17703 BONIELLO DR.
CITY - ST - ZIP BOCA RATON FL

TITLE S
NAME HOWER, JEANNE
STREET ADDRESS 17703 BONIELLO DR.
CITY - ST - ZIP BOCA RATON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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TITLE
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CITY - ST - ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JEANNE HOWER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/28/96

407-994-8211

CR2E034 (3/96)