

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

FILED

May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J03543 (2)
 1. Corporation Name
EASTERN CHEMICAL CORPORATION



Principal Place of Business 1131 N.W. 35 AVE. MIAMI FL 33125 US	Mailing Address 1131 N.W. 35 AVE. MIAMI FL 33125-2839 US
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21 2. Principal Place of Business Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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3 Date Incorporated or Qualified 03/10/1986	3a Date of Last Report 04/29/1996
4 FEI Number 59-2718635	Applied For Not Applicable
5 Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8 This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9 Name and Address of Current Registered Agent VILLASANA, FLORENCIA 8421 N.W. 8TH STREET, APT. 211 MIAMI FL 33128
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10 Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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: *Florencia Villasana* *FLORENCIA VILLASANA - DIRECTOR* *4/21/97*
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS	
12 TITLE PD SILVA, GILBERTO J. 1131 N.W. 35TH AVE. MIAMI FL	<input type="checkbox"/> DELETE
13 TITLE STD HEER-SILVA, CLAUDIA 10300 NW 9TH ST CIRCLE MIAMI FL	<input type="checkbox"/> DELETE
14 TITLE D VILLASANA, FLORENCIA 8421 NW 8TH ST., APT 211 MIAMI FL	<input type="checkbox"/> DELETE
15 TITLE DELETED	<input type="checkbox"/> DELETE
16 TITLE DELETED	<input type="checkbox"/> DELETE
17 TITLE DELETED	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 its 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 or Block 14, or in an attachment with an address.

SIGNATURE: *Gilberto J. Silva* *GILBERTO J SILVA PRASIDANT* *4/21/97* *305-541-9334*
(Signature and typed or printed name of signing officer or director) (Date) (Daytime Phone #)

CRZE034 (9/96)