

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

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Feb 25 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 # J09955 (2)  
1. Corporation Name  
CHEMEXPORT, INC.

Principal Place of Business  
100 W. MIDDLE RD  
RIVIERA BEACH FL 33404  
US

Mailing Address  
PO BOX XX9728  
WEST PALM BCH FL 33409  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/18/1986	
21	Suite, Apt. #, etc.	26	PO BOX 9728	4. FEI Number 59-2663791	Applied For Not Applicable
22	City & State	27	West Palm Beach FL 33409	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	WEST PALM BEACH	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country U.S.	29	33409	30	U.S.
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

JURGENS, OTTFRIED (MR)  
2850 GETTYSBURG LANE  
W PALM BCH FL 33409

81 Name JACK BAHL  
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 MARIA BAHL. 2/18/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	DIRECTOR
NAME	JURGENS, O. W.	1.2 NAME	JACK BAHL
STREET ADDRESS	2850 GETTYSBURG LANE	1.3 STREET ADDRESS	1033 ASPIRI WAY
CITY-ST-ZIP	W PALM BCH FL	1.4 CITY-ST-ZIP	West Palm Beach FL- 33418
TITLE	V	2.1 TITLE	PRESIDENT
NAME	JURGENS, P.	2.2 NAME	MARIA BAHL
STREET ADDRESS	2850 GETTYSBURG LANE	2.3 STREET ADDRESS	1033 ASPIRI WAY
CITY-ST-ZIP	W PALM BCH FL	2.4 CITY-ST-ZIP	WEST PALM BCH FL- 33418
TITLE	D	3.1 TITLE	
NAME	JURGENS, A.	3.2 NAME	
STREET ADDRESS	2850 GETTYSBURG LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BCH FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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 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: Maria Bahl 2/19/98 361-845-6391

CR2E034 (10/97)