

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K15057** (8)

1. Corporation Name
CHEM-TECH INTERNATIONAL, INC.



Principal Place of Business: **3718 N QUAIL RIDGE DR BOYNTON BCH FL 33436**
Mailing Address: **3718 N QUAIL RIDGE DR BOYNTON BCH FL 33436**

3. Date Incorporated or Qualified 02/16/1988	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0044537	Applied For <input type="checkbox"/> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
WADE, DAVID L 3718 N QUAIL RIDGE DR BOYNTON BCH FL 33436		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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPC	1.1 TITLE	LARRY HOWE STD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WADE, DAVID L	1.2 NAME	LARRY HOWE
STREET ADDRESS	3718 N QUAIL RIDGE DR	1.3 STREET ADDRESS	1606 OLD STAGE RD
CITY- ST- ZIP	BOYNTON BCH FL	1.4 CITY- ST- ZIP	ALEXANDRIA VA. 22309
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUGTEREN, GEN. CORNELIUS	2.2 NAME	
STREET ADDRESS	114 HOLLY DR	2.3 STREET ADDRESS	
CITY- ST- ZIP	WARNER ROBINS GA	2.4 CITY- ST- ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALOTTA, MICHAEL	3.2 NAME	
STREET ADDRESS	435 BURT STREET	3.3 STREET ADDRESS	
CITY- ST- ZIP	SISTERSVILLE WV	3.4 CITY- ST- ZIP	
TITLE	STD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, SAM	4.2 NAME	
STREET ADDRESS	1800 DIAGONAL RD, #150	4.3 STREET ADDRESS	
CITY- ST- ZIP	ALEXANDRIA VA	4.4 CITY- ST- ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSEN, DAVID	5.2 NAME	
STREET ADDRESS	6260 FALL CIRCLE S	5.3 STREET ADDRESS	
CITY- ST- ZIP	LAUDERHILL FL	5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 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; 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, changed, or on an attachment with an address.

SIGNATURE: *David L Wade* **DAVID L. WADE** 2-27-96 8004364589
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)