


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007 08:00 A
Secretary of State

DOCUMENT # L00000015742 1. Entity Name ASH CHEMICAL, LLC	
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Principal Place of Business 2180 W. STATE ROAD 434 SUITE 2118 LONGWOOD, FL 32779	Mailing Address 2180 W. STATE ROAD 434 SUITE 2118 LONGWOOD, FL 32779
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DO NOT WRITE IN THIS SPACE



01302007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3709611	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FRIEDMAN, MARTIN S
SANDLANDO CENTER
2180 W. STATE ROAD 434, SUITE 2118
LONGWOOD, FL 32779

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

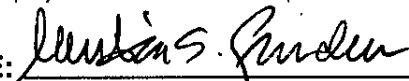
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FRIEDMAN, MARTIN S 2180 W. STATE ROAD 434, SUITE 2118 LONGWOOD, FL 32779
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05/01/07-80039-001 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **3.15.07** **407.830.6331**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #