File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 FEB 22 PH 2: 18 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETART OF STATE TALLAHASSEE, FLORIDA Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT #** L9700000335 1a. Principal Place of Business Address PHOSCHEM CONTRACT SERVICES, LLC 2165 HIGHWAY 37 SOUTH MULBERRY FL 33860 2165 HIGHWAY 37 SOUTH MULBERRY FL 33860 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 03/21/1997 FLSuite, Apt. #, etc. Suite. Apt. #. etc. 4. FEI Number Applied For City & State City & State 59-3440467 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 04/13/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office FROST, JOHN W II 395 SOUTH CENTRAL AVE. Street Address (P.O. Box Number is Not Acceptable) BARTOW FL 33830 **900002789159--8** -02/26/99--01095--014 ****150 - ****160.75 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. DATE. SIGNATURE ____ (Beginneral Agent Accepting Applictment). (NOTE: Bolton on Agent signation in sported when it could 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MEM PHOSCHEM SUPPLY CO. , 2165 HIGHWAY 37 SOUTH MULBERRY FL MEM MEARS, CARL E 2165 HIGHWAY 37 SOUTH MULBERRY FL 51.24-99 11 1do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am a managing member or manager of the limited hability company or the ecen r or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATUR INHSE 10 R (12-98)