
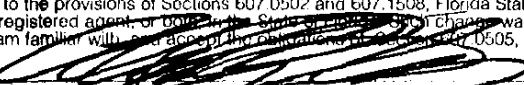



FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # M32225 (8)</b> 1. Corporation Name <b>INDUSTRIAL CORROSION SERVICES, INC.</b>					
Principal Place of Business <b>8809 NW 80TH AVE. BAY 9-N HIALEAH GARDENS FL 33016 US</b>			Mailing Address <b>8809 NW 80TH AVE. BAY 9-N HIALEAH GARDENS FL 33016 US</b>		
2. Principal Place of Business 21 <b>9401 NW 109 ST</b> Suite, Apt. #, etc. 22 <b>Bay 5</b> City & State 23 <b>Medley FL</b> Zip 24 <b>33178</b>		2a. Mailing Address 26 <b>9401 NW 109 ST</b> Suite, Apt. #, etc. 27 <b>Bay 5</b> City & State 28 <b>Medley FL</b> Zip 29 <b>33178</b>		3. Date Incorporated or Qualified <b>05/16/1986</b> 4. FEI Number <b>59-2674357</b> 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>BELANGER, ALAIN 2884 EDGEHILL LN. COOPER CITY FL 33026</b>				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 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 a registered agent under 605, Florida Statutes. SIGNATURE  <b>Alain Belanger</b> 04/22/98 Signature, typed or printed name of Registered Agent and fee, if applicable. (NOTE: Registered Agent's signature required when reinstating.) DATE					
12. OFFICERS AND DIRECTORS TITLE <b>PTD</b> <input type="checkbox"/> DELETE NAME <b>DESROCHERS, JEAN</b> STREET ADDRESS <b>8809 NW 80TH AVE, BAY 9-N</b> CITY-ST-ZIP <b>HIALEAH GARDENS FL</b> TITLE <b>D</b> <input type="checkbox"/> DELETE NAME <b>REJEAN, JULIEN</b> STREET ADDRESS <b>4110 DAKOTA PLACE</b> CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b> TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 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:  <b>Jean Desrochers</b> 04/22/98					



DO NOT WRITE IN THIS SPACE

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