2003 FOR PROFIT CORPORATION

Jan 23, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P00000104832 DOCUMENT # 1. Entity Name 01-23-2003 90085 030 ***150.00 BIO-CHEM RESOURCES, INC. Principal Place of Business Mailing Address DA PĂY CHIME-921-LOTUS-LANE JACKSONVILLE FL 32260A JACKSONVILLE FL 32259 1816 TALBOT AVE. 1816 TALBOT AVE. MCKSONVILLE FL 32205 JACKSONVICLE FL37205 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number 59-3696491 City & State City & State Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required. 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SARNWELL BARNWELL R. DALEY Street Address (P.O. Box Number is Not Acceptable) 1816 TALBOT AVE JACKSONVILLE FL 32259 JACKSON VICLE, FL 32205 1816 TALBOT AVE. 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 ragistered agent. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 150 After May 1, 2003 Fee will be \$550.00 * Trust Fund Contribution: Added to Fees e Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ☐ Addition Change TITI F ☐ Delete SCHMITZ, WILFRIED J NAME NAME 10387 AUTUMN VALLEY ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Jacksonville FL 32257 CITY-ST-ZIP ■ Addition TITLE ☐ Delete **VPT** NAME FRANCIS, DAVID NAME STREET ADDRESS 921 LOTUS LANE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32259 CITY-ST-ZIP ☐ Change → ☐ Addition DIRECTOR ŤITI E Delete TITLE BARNWELL R. DALEY 1816 TALBOT AVE NAME NAME STREET ADDRESS STREET ADDRESS 32205 CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Addition Change ☐ Delete TITLE DIRECTOR TITLE 1. SIMS RHYNE NAME NAME 1816 TALBOT AVE STREET ADDRESS STREET ADDRESS 32205 CITY-ST-ZIP CITY-ST-ZIP IACKSON VICLE ☐ Change Addition TITLE JAMES HUME NAME NAME 1816 TALBOT AVE STREET ADDRESS STREET ADDRESS 2205 -CITY-ST-ZIP JACKSONVICLE CITY-ST-7IP Change ☐ Addition Delete TITLE TITLE NAME NAME

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

E034 (10/02)

FILED