FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Aug 29, 2001 8:00 am P01000000485 DOCUMENT # Secretary of State 1. Entity Name CHEMSCAPE, INC. 08-29-2001 90004 041 ***550.00 Principal Place of Business Mailing Address 128 KAPOK CRESCENT 128 KAPOK CRESCENT ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 10300 W, forest Hill 3. Mailing Address crescent Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For Not Applicable Zip 🕖 Country \$8.75 Additional 5. Certificate of Status Desired Palm Repo alm Bea Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent والمحب الوادي والأم الحيام يسييهم لوار GOLDSTEIN, RICK S Street Address (P.O. Box Number is Not Acceptable) 128 KAPOK CRESCENT ROYAL PALM BEACH FL 33411 Zip Code submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be-After September 12, 2001 Fee Will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (5/01 TITLE □ Delete TITLE ☐ Addition NAME **GOLDSTEIN, RICK S** NAME 128 KAPOK CRESCENT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplymental report is true and occurate 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 of trustee empowered beexecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the recei changed, or on an attachmen