

5/19

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jun 23, 2002 8:00 am
Secretary of State

05-19-2002 90033 006 ***150.00

DOCUMENT # P01000072568

1. Entity Name

INDUSTRIAL CHEM ENTERPRISE, INC.

Principal Place of Business

15962 NW 14 PLACE
PEMBROKE PINES FL 33028

Mailing Address

15962 NW 14 PLACE
PEMBROKE PINES FL 33028

2. Principal Place of Business

4432 N. UNIVERSITY DR

3. Mailing Address

P.O. BOX 268777

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAUDERHILL, FL.

City & State

WESTON, FL.

Zip

33351

Country

BROWARD

Zip

33326

Country

BROWARD

4. FEI Number

65-1127034

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHEPS, NATALIA

15962 NW 14 PLACE

PEMBROKE PINES FL 33028

7. Name and Address of New Registered Agent

Name

MARK ZIMMERMAN OWNER

Street Address (P.O. Box Number is Not Acceptable)

7980 N.W. 53RD CT.

City

LAUDERHILL

FL

Zip Code

33351

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.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	NATALIA SHEPS	15962 N.W. 14th PL	PEMBROKE PINES, FL. 33028	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	OWNER MARK ZIMMERMAN	7980 N.W. 53RD CT.	LAUDERHILL, FL. 33351	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)