FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2004 8:00 am
Secretary of State
05-06-2004 90168 021 ***150.00

DOCUMENT # P020000 48440

1. Entity Name
KOOP CHEMICALS INC

DO NOT WRITE IN THIS SPACE

54053080

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2. Principal Place of Business	3. Mailing Address
4811 87TH AVE S	
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State: GULF PORT	City & State
Zip: FL — Country: 33707	Zip — Country

4. FEI Number: 37-1435279 — Applied For / Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: LUTER SAMMIE
Street Address (P.O. Box Number is Not Acceptable): 1375 PASADENA AVE
City: SOUTH PASADENA — **FL** — Zip Code: 33707

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 registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ — **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRST-D	TITLE	
NAME	LUTER KEVIN	NAME	
STREET ADDRESS	4911 87TH AVE SOUTH	STREET ADDRESS	
CITY-ST-ZIP	GULF PORT, FL 33707	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin J. Luter — KEVIN LUTER PRESIDENT — 4-30-04 — (727) 321-3421
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #