

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90103 002 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P29363

1. Corporation Name

INTERNATIONAL MINERALS & CHEMICAL CORPORATION

Principal Place of Business

ATTN: TAX DEPT
2345 WAUKEGAN RD., STE. E-200
BANNOCKBURN IL 60015-5516
US

Mailing Address

ATTN: TAX DEPT
2345 WAUKEGAN RD., STE. E-200
BANNOCKBURN IL 60015-5516
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1990

2. Principal Place of Business

21 2100 Sanders Road
Suite, Apt. #, etc.

2a. Mailing Address

26 2100 Sanders Road
Suite, Apt. #, etc.

4. FEI Number

36-3791267

Applied For

Not Applicable

22
City & State

Northbrook, IL

27
City & State

Northbrook, IL

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23
Zip Country

60062-6146

25

28
Zip Country

60062-6146

30

US

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

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

83

84 City

FL

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, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VSD** ☒ DELETE
NAME **SMITH, MARSHALL I**
STREET ADDRESS **2100 SANDERS RD**
CITY-ST-ZIP **NORTHBROOK IL 60062**

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **James, J. Bradford**
1.3 STREET ADDRESS **2100 Sanders Road**
1.4 CITY-ST-ZIP **Northbrook, IL 60062-6146**

TITLE **AS** ☒ DELETE
NAME **SMITH, ROXANNE**
STREET ADDRESS **2345 WAUKEGAN RD., STE. E-200**
CITY-ST-ZIP **BANNOCKBURN IL 60015-5516**

2.1 TITLE **AS** ☐ Change ☒ Addition
2.2 NAME **McGowan, Joseph A., IV**
2.3 STREET ADDRESS **2100 Sanders Road**
2.4 CITY-ST-ZIP **Northbrook, IL 60062-6146**

TITLE **AS** ☒ DELETE
NAME **BRIGGS, DAVID W**
STREET ADDRESS **2345 WAUKEGAN RD., SUITE E-200**
CITY-ST-ZIP **BANNOCKBURN IL 60015-5516**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph A. McGowan

4/30/99

(847) 272-9200

CR2E034 (11/98)