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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P32991

HYDRO AGRI AMMONIA, INC.

FILED Jun 02 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address													
100 N. TAMPA STREET			100 N. TAMPA STREET										
8TE, \$200 Tampa Fl. 33602		STE. #3200 Tampa Fl 33602-5810											
138			US			3	3. Date Incorporated 02/28/1991	corporated or Qualified 3a. Date of Last R. 04/17/1996			Report		
2. Principal P	Place of Business	2a.	Mailing Address				4	FEI Number		· · ·	Ā	pplied For	
21		26						59-3040501			N	ot Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.						- D-+:d		\$8.75	Additional	
22			27				•	Certificate of Statu	s Desired	Lad	Fee R	equired	
City & State			City & State				•	3. Election Campaign	Financing		\$5.00	May Be	
23		28	- 				Trust Fund Contribution				Added	to Fees	
Zip	Country	\Box	Zip	Cou	intry	/	E	This corporation has				s. 199.032,	
24	25	29		30				Florida Statutes		Yes L		i	
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
	DMAS M CALCTERRA				81	Name	Bio	orn Bach					
	1 HARBOUR ISLAND BLVD.				82	Street A		(P.O. Box Number is	Not Acceptab	le)			
	T 2405												
TAN	APA FL 33802				83		100	N. Tampa	St.	Ste 1	3200	1	
					84	City		211 Tampe	0017			Code	
	·					1 "	Tan	npa		FL	3	Code 3602	
11. Pursuant	to the provisions of Sections 607 8502	and 60	07.1508, Florida Statut	es, the al	bovi	e-named	corporat	ion submits this state	ment for the p	urpose of	changing i	its registered	
agent. I s	11. Pursuant to the provisions of Sections 807 8522 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 milliand accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE			— Bio	en Ba	ac	h. P	resi	.dent			9/97		
	Signature, typing or printed name of registered agen		if applicable. (NOT	E: Registere	d Age	ent signature	required wh	non reinstating)					
12.	OFFICERS AND	DIREC		13.			222	ADDITIONS/CHANG	ES TO OFFIC		DIRECTOR Change	Addition	
TITLE	PD '		☐ DELETE	11 1			PDS	o'I'		,	CT Change	L. Audilion	
NAME	BACH, BJORN			1.2 N								ŀ	
STREET ADDRESS	100 N. TAMPA ST. STE #3200					ADDRESS							
CITY-ST-ZIP	TAMPA FL		DELETE			ST-ZIP					Change	Addition	
TITLE	DVST		DELETE:	2.1 1)		-				ı	Change	LJ Addition	
NAME	CALCATERRA, THOMAS M.	KOOOO		22 N									
STREET ADDRESS	100 N. TAMPA STREET, STE.	3200				ADDRESS	1						
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NAME	COCKMAN, JAMES EDDIE	10000		3.2 N									
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NAME				4. 2 N						\wedge		1	
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NAME				6.2 N				-06/10/s	370104	702	5		
STREET ADORESS				1		ADDRESS		***165.0					
CITY-ST-ZIP				64C	TY-S	ST-ZIP	1		erer Van talan kanan sa		30		

I do 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 proporation or the eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block in changed or in an attachment with an address.