2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000008943

Entity Name: CHEMLINE PRODUCTS, INC.

FILED Feb 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3813 - 126TH AVENUE 3813 - 126TH AVENUE N

SUITE 7 SUITE #7

CLEARWATER, FL 33762 US CLEARWATER, FL 33762 US

Current Mailing Address: New Mailing Address:

PO BOX 21649 PO BOX #21649

ST PETE, FL 33742 US ST PETE, FL 33742 US

FEI Number: 59-3227934 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIBENEDETTO, FRANK J DIBENEDETTO, PATRICIA A PRES. 3813 - 126TH AVENUE N 3813 - 126TH AVENUE N

CLEARWATER, FL 33762 US SUITE #7

CLEARWATER, FL 33762 US

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: PATRICIA A DIBENEDETTO 02/15/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 DIBENEDETTO, FRANK J
 Name:
 DIBENEDETTO, PATRICIA A PRES

 Address:
 3813-126TH AVENUE N

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: CLEARWATER, FL 33762

Title: ST () Delete Title: S/T (X) Change () Addition Name: HELMS, MICHELLE Name: HELMS, MICHELLE

 Name:
 HELMS, MICHELLE

 Address:
 3813 - 126TH AVENUE

 City-St-Zip:
 CLEARWATER, FL 33762

 City-St-Zip:
 CLEARWATER, FL 33762

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 DIBENEDETTO, PAT
 Name:
 SATCHER, LISA

 Address:
 3813 - 126TH AVENUE
 Address:
 3813 - 126TH AVENUE N

 City-St-Zip:
 CLEARWATER, FL 33762
 City-St-Zip:
 CLEARWATER, FL 33762

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 MCRANIE, AMY

 Address:
 Address:
 3813 - 126TH AVENUE N

 City-St-Zip:
 City-St-Zip:
 CLEARWATER, FL 33762

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE HELMS S/T 02/15/2005