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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 11 1998 8:00am Secretary of State

1. Corporation	MEN 1 # P94(FORD CHEMICALS, INC	000029346 (1 _.)		
Principal Place of Business		Mailing Address			180 (4)34 0 104 0 (341 (88)
2206 BABBITT AVE. OFLANDO FL 32833		2206 BABBITT AVE. ORLANDO FL 32833		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				04/19/1994	ļ
 -	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26		59-3228729	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	8.75 Additional
City & State		City & State		C Floation Compaign Financias	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current	
24	25	29	30	Personal Property Tax due June 30.	
	9, Name and Address of C	urrent Registered Agent		10. Name and Address of New Registered Age	nt
BARNCORD, GRETA			81 Name		
114 7TH STREET			82 Street Add	ddress (P.O. Box Number is Not Acceptable)	
CHULUOTA FL 32766			63		
			84 City	FL ⁸	5 Zip Code
11. Pursuant office or ragent. I a	in r a nililar with, and accept the t	obligations of, Section 607.0505, Fi	tes, the above-named corp authorized by the corporat lorida Statutes.	poration submits this statement for the purpose of cha tion's board of directors. I hereby accept the appointr	anging its registered ment as registered
	Signature, typed or printed name of register		If Angistered Agent signature requir		
TITLE	D	S AND DIRECTORS	13, 1.1 Title	ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTORS IN 12 S Change Addition
NAME	CRAWFORD, MARY A		12 NAME		Change
STREET ADDRESS 2206 BABBITT AVE.			1.3 STREET ADDRESS		9
CITY-ST-ZIP	ORLANDO FL 32833		1.4 CITY-S1-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	CRAWFORD, WAYNE L		2.2 NAME		
STREET ADDRESS 2206 BABBITT AVE.			2.3 STREET ADDRESS		
CITY-ST-ZIP ORLANDO FL 32833			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	U	Change
NAME Street address			3.2 NAME		
CITY-ST-ZIP				•	
TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 Title		Change Addition
NAME	•		4. 2 NAME		- mange [] naonioi
STREET ADDRESS	ss		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	6 1 TITLE		Change
NAME STREET ADDRESS			6.2 NAME		
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS		
	ertify that the information supplie	ed with this filing does not qualify for	6.4 City-St-ZiP or 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.