## 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

## DOCUMENT # P9400066670 (8)

## FILED May 12 1998 8:00am Secretary of State

PREMIE	ER CHEMICAL CORPORATIO	N					JJ <b>33</b> JJ <b>33</b> J
Principal Plac	e of Business	Mailing Address					
4606 W. CRES		3120 MARLIN AVENUE					
TAMPA FL 33614 TAMPA FL 33611					. DO NOT WOITE IN THE	2000	
					DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	SPACE	<del></del>
	-				09/06/1994		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	- I Ar	oplied For
27 HOA	1 South 50th ST.	26			59-3268303	<b>—</b>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	T	Additional
22 27					o, commoda of class posted		equired
City & Stat	LAPA FL	City & State		6. Election Campaign Financing Trust Fund Contribution		May Be	
23 \ 74 \ Zip	Country	28   	Count	·v	Trust Fund Contribution  8. This corporation owes or has paid the c		to Fees
24 B36		} ¬	00	,	Personal Property Tax due June 30.		No
J. J	9. Name and Address of Current				10. Name and Address of New Registered		
SP/	ARKS, DAVID W		8	Name			
3120 MARLIN AVE				2 Street Ac	idress (P.O. Box Number is Not Acceptable)		<del></del>
TAI	MPA FL 33611						
			8:	3]			
			84	City		<b>85</b> Zip	Code
44 Durewant	to the acceptance of Sections 507 0502	and 607 1609 Florida Statutos	the abo	o named co	F		to registered
office or r	egistered agent, or both, in the State of	of Florida, Such change was au	thorized t	by the corpo	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as	registered
•	im familiar with, and accept the obligat	HOUS OF Section 607.0505, Flori	ida Statuti	98			
SIGNATURE	Signature, typed or printed name of registered agree	: and title diapphabre (NOTE	Rogistered A	gent signature re	cjuited when reinslating) DATE	,	
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN		RS IN 12
TITLE	P	L] DELETE				Change	☐ Addition
NAME	SPARTS, MICHELLE D		1.2 NAME				
STREET ADDRESS	3120 MARLIN AVE			T ADDRESS			
CITY-ST-ZIP TITLE	TAMPA FL VP			SI-ZIP		Change	Addition
NAME	SPARKS, DAVID	· · · · · · · · · · · · · · · · · · ·				ET CHARGO	L. Addition
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP	TAMPO A PI		2. 4 CITY				
TITLE			3.1 TITLE			Change	Addition
NAME	SPARKS, DAVID		3.2 NAME				
STREET ADDRESS	3120 MARLIN AVE		3.3 STREE	I ADDRESS			
CITY-ST-ZIP			3 4. CITY	· ST - ZIP			
TITLE	•		4 1 TITLE			Change	☐ Addition
NAME	SPARKS, MICHELLE		4 2 NAM	´			
STREET ADDRESS	3120 MARLIN AVE		4.3 STREET ADDRESS : 4.4 City-St-Zip				
CITY-ST-ZIP TITLE	TAMOPA FL	☐ <b>DE</b> LETE	4.4 CITY- 5.1 TITUE	S1-ZIP		Change	Addition
NAME		beech	5.2 NAME			☐ Oriende	- Addition
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY-				
TITLE		DELETE 6.17				Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY -	S1-ZIP			
14 I hereby c	artifuthat the information constined with	h this films done not qualify for	the ever	otion stated	in Continu 110 07/2)/i) Florida Statutos I further o	ortify that the	information

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 eath; 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 12 if changed, or on an attachment with an address.

CIONATURE:

Mishall

US 198

(0,2)248-9554