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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000021675 (9)

CIEMEX AMERICA, INC.

FILED Apr 06 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1215 VIA SALERNO 1215 VIA SALERNO WINTER PARK FL 32789 WINTER PARK FL 32788 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/11/1996 2. Principal Place of Business 2a. Mailing Address FEI Numbe Applied For 21 26 59-3365870 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζιρ Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. X Yes □ No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GUSTINO, JAMES A 2180 PARK AVENUE NORTH 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 324** 83 WINTER PARK FL 32789 City 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 (NOTF: Registered Agont signature regulared when reinstalling) (10/97 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE DRINKENBURG-WALD, JOHANNA NAME 1.2 NAME CR2E034 1215 VIA SALERNO 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 32789 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TOLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Addition 4.1 TITLE Change TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CfTY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 is true and accurate and that my signature shall have the same legal offect as if made under oath; that I am an officer or director of the exportant properties true and accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change 1, you han full schement with an additions.

TO PROCEED BY ON A PROCESS OF THE CHANGE OF

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