


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90284 033 ***150.00

DOCUMENT # P97000023486 1. Entity Name BIO CHEM INDUSTRIES, INC.	
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Principal Place of Business 15790 BENT CREEK ROAD WELLINGTON, FL 33414	Mailing Address 15790 BENT CREEK ROAD WELLINGTON, FL 33414
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01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0739025	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FELDMAN, MAL
15790 BENT CREEK RD
WELLINGTON, FL 33414

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Phyllis Feldman DATE: 1/7/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	P FELDMAN, PHYLLIS 15790 BENT CREEK ROAD WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST- ZIP	S THOMAS, DEBORAH 15790 BENT CREEK ROAD WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP FELDMAN, MALCOLM 15790 BENT CREEK ROAD WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Phyllis Feldman DATE: 1/7/04 DAYTIME PHONE: 561 790 1166

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR