

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

FILED

May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P97000072815 (8)

1. Corporation Name
JOHNSON CHEMICAL, INC.

Principal Place of Business

8306 MILLS DR
SUITE 200
MIAMI FL 33183

Mailing Address

8306 MILLS DR
SUITE 200
MIAMI FL 33183

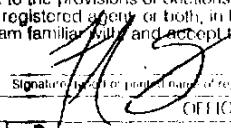
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 4246 N.W. 37 AVE	26 4246 N.W. 37 AVE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Miami, FL	28 City & State Miami, FL
24 Zip 33142	29 Zip 33142
25 Country	30 Country

3. Date Incorporated or Qualified 08/21/1997	4. FEI Number 65-0831943
5. Certificate of Status Desired <input type="checkbox"/>	Applied For Not Applicable
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$8.75 Additional Fee Required
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MENA, JUAN G 8306 MILLS DR SUITE 200 MIAMI FL 33183	81 Name Forrest Sugman 82 Street Address (P.O. Box Number is Not Acceptable) 328 Minerva Ave 83 84 City Coral Gables FL 85 Zip Code 33134

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  Forrest Sugman VP 4/30/98
(NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
D MENA, JUAN G 8306 MILLS DR SUITE 200 MIAMI FL 33183	CEO CHAIRMAN JANICE MENA 14201 SW 88 ST MIAMI FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
D RAMIREZ, CARLOS 15476 NW 77TH CT SUITE 239 MIAMI FL 33016	President Eduardo Sanchez 5567 SW 7 ST MIAMI FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE	Vice President Forrest Sugman 328 Minerva Ave Coral Gables FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE	TREASURER Nydia Reyes 151 W. 5th Street Hialeah FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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.

SIGNATURE: Janice Mena, Janice Mena 6/1/98 (305) 634-4003

CP2E034 (10/97)