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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000050485

1. Corporation Name
OCI USA INC.

Principal Place of Business	Mailing Address
8560 NW 64TH ST MIAMI FL 33166-2627	8560 NW 64TH ST MIAMI FL 33166-2627

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/01/1998
4. FEI Number: 98-0191049 ☑ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☑ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip — Country
24 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip — Country
29 30

9. Name and Address of Current Registered Agent

LIM, CHIN TEEN
8560 NW 64TH ST
MIAMI FL 33166-2627

10. Name and Address of New Registered Agent
91 Name: WEI-KAI WANG
92 Street Address (P.O. Box Number is Not Acceptable): 8560 NW 64th St.
93
94 City: Miami FL 95 Zip Code: 33166

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] General Manager (Signature, Name of Officer or General Partner of registered agent and title if applicable) (NOTE: Registered Agent signature required when amending) DATE: 1/15/99

12. OFFICERS AND DIRECTORS

TITLE	DIRECTOR	☐ DELETE
NAME	DING MEE LENG	
STREET ADDRESS	2, JALAN 1/137C, BEDFORD BUSINESS	
CITY-ST-ZIP	PARK, KUALA LUMPUR, MALAYSIA	
TITLE	DIRECTOR	☐ DELETE
NAME	WANG CHING SEN	
STREET ADDRESS	2, JALAN 1/137C, BEDFORD BUSINESS	
CITY-ST-ZIP	PARK, KUALA LUMPUR, MALAYSIA.	
TITLE	OFFICER	☐ DELETE
NAME	WEI-KAI WANG	
STREET ADDRESS	8560 NW 64th Street	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: [signature] WEI-KAI WANG 1/15/99 (305)443-5311
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #
[WEI-KAI WANG]