


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000038719	
1. Entity Name SUNCHEM, INC.	

Principal Place of Business 7560 BLACK OLIVE WAY TAMARAC, FL 33321	Mailing Address 7560 BLACK OLIVE WAY TAMARAC, FL 33321
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01192006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0969383	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GHASSEDI, JOSEE
7560 BLACK OLIVE WAY
TAMARAC, FL 33321**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GHASSEDI, JOSEE 7560 BLACK OLIVE WAY TAMARAC, FL 33321
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02/01/06-80028-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **1/19/06** Daytime Phone # **954-209837**