

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathum
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S19576** (5)
1. Corporation Name
SOUTHERN CHEMICAL MANUFACTURING CORPORATION



Principal Place of Business

8350 N.W. 66TH ST.
MIAMI FL 33166

Mailing Address

8350 N.W. 66TH ST.
MIAMI FL 33166

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

MOREIRA, MARTIN R.
8350 N.W. 66TH STREET
MIAMI FL 33166

3. Date Incorporated or Qualified 12/19/1990	3a. Date of Last Report 03/28/1995
4. FET Number 65-0235922	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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☒ No	
10. Name and Address of New Registered Agent	

11. Pursuant to the provisions of Sections 607.07(2) and 607.15(6), 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 607.07(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1 NAME V MOREIRA, MARTIN JR. 1456 HERITAGE RD. GAINESVILLE GA 30501	[] DELETE
12.2 NAME VA MOREIRA, CESAR 9231 S.W. 101 AVE. MIAMI FL 33176	[] DELETE
12.3 NAME [] DELETE	[] DELETE
12.4 NAME [] DELETE	[] DELETE
12.5 NAME [] DELETE	[] DELETE
12.6 NAME [] DELETE	[] DELETE
12.7 NAME [] DELETE	[] DELETE
12.8 NAME [] DELETE	[] DELETE
12.9 NAME [] DELETE	[] DELETE
12.10 NAME [] DELETE	[] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	[] Change [] Addition
13.2 NAME	[] Change [] Addition
13.3 STREET ADDRESS	[] Change [] Addition
13.4 CITY-STATE-ZIP	[] Change [] Addition
13.5 NAME	[] Change [] Addition
13.6 NAME	[] Change [] Addition
13.7 STREET ADDRESS	[] Change [] Addition
13.8 CITY-STATE-ZIP	[] Change [] Addition
13.9 NAME	[] Change [] Addition
13.10 NAME	[] Change [] Addition
13.11 STREET ADDRESS	[] Change [] Addition
13.12 CITY-STATE-ZIP	[] Change [] Addition
13.13 NAME	[] Change [] Addition
13.14 NAME	[] Change [] Addition
13.15 STREET ADDRESS	[] Change [] Addition
13.16 CITY-STATE-ZIP	[] Change [] Addition
13.17 NAME	[] Change [] Addition
13.18 NAME	[] Change [] Addition
13.19 STREET ADDRESS	[] Change [] Addition
13.20 CITY-STATE-ZIP	[] Change [] Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information appearing 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. 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:

Cesar Moreira
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96 (305) 591-7797
DATE AND TELEPHONE NUMBER

CR2E034 (12/95)