FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Jun 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # V59466

1. Corporation Name
NIZHNEKAMSKNEFTEKHIM USA, INC.

Principal Place of Business
1717 N. Bayshore Drive
Suite #2200
Miami FL 33132

Mailing Address
Same

3. Date Incorporated or Qualified: 08/21/92
3a. Date of Last Report: 05/01/96

2. Principal Place of Business — 21: 333 Earle Ovington Blvd
22: Suite #103
23: Uniondale NY
24: 11553-4635
25: Country: USA

2a. Mailing Address — 26: 333 Earle Ovington Blvd.
27: Suite #103
28: Uniondale NY
29: 11553-4635
30: Country: USA

4. FEI Number: 65-0403635 — ☐ 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

9. Name and Address of Current Registered Agent
James L. Zachary
1717 N. Bayshore Drive
Suite #2200
Miami FL 33132

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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: James L. Zachary — James L. Zachary President — May 28, 1997
Signature of new registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DIRECTOR	☒ DELETE	1.1 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	SAKHAROV, G.B.		1.2 NAME	GALIEV, R.G.	
STREET ADDRESS	1717 N. Bayshore Drive Suite 2200		1.3 STREET ADDRESS	333 Earle Ovington Blvd. Suite 103	
CITY-ST-ZIP	Miami FL 33132		1.4 CITY-ST-ZIP	Uniondale NY 11553-4635	
TITLE	DIRECTOR	☒ DELETE	2.1 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	KOTSABA, E.M.		2.2 NAME	MUSTAFIN, K.V.	
STREET ADDRESS	1717 N. Bayshore Drive Suite 2200		2.3 STREET ADDRESS	333 Earle Ovington Blvd. Suite 103	
CITY-ST-ZIP	Miami FL 33132		2.4 CITY-ST-ZIP	Uniondale NY 11553-4635	
TITLE		☐ DELETE	3.1 TITLE	PRESIDENT & DIRECTOR	☒ Change ☐ Addition
NAME			3.2 NAME	ZACHARY, JAMES L.	
STREET ADDRESS			3.3 STREET ADDRESS	333 Earle Ovington Blvd. Suite 103	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Uniondale NY 11553-4635	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

RM 6-6-97

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14. I do 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: James L. Zachary — James L. Zachary President/Director — 05/28/97 — (516) 542-0500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #