

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State.

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - M. (FORM MUST BE TYPED OR PRIN		Fce: \$50.00			
1. Corporate ID No.	2. Name of Corporation				
134852	Degussa Corporation				
3. Street Address Principal Business Office			City	State	Zip
379 Interpace	Parkway	_	Parsippany	NJ	07054
4. Business Phone No.		5 State of Incorporation			6. SIC Code
973-541-8584 7. Brief Description of the Character of	(p	ALABAMA			
SPECIALTY CHEMICAL	y misness conducted in R S MANUFACTURING	bode Island			
8. NAMES AND ADDRESSES President Name John C. Salvat	OF THE OFFICERS:	("X" BOX FOR ATTA	Vice President Name	PACES BEFORE USING	ATTACHMENTS
Sincer Address			Peter A. Vinocur		
23700 Chagrin Blvd.			Street Address 23700 Chagrin Blvd.		
City	State	Zip	: City	State	ZIp
Beachwood	ОН	44122	Beachwood	ОН	44122
Secretary: Name	4	A	Treusurer Name Assis		J9.9.J. <i>Z.</i> Z
Peter A. Vinocur			James S. Olsen		
Sirce Address			Street Address		
23700 Chagrin Blvd.			379 Interpace Pkwy.		
Beachwood	State	Zip	City	State	Zip
	OH	44122	Parsippany	NJ	07054
9. NAMES AND ADDRESSES Director Name	OF THE DIRECTOR	S: ("X" BOX FOR AT	TACHMENT) FILL IN . Director Name	SPACES BEFORE USIN	IG ATTACHMENTS
John C. Salvatore			Hans-Joachim Kollmeier		
Sirvet Address			Street Address		
23700 Chagrin Blvd.			Goldschmidtstrasse 100		
City	State	Zip	City	State	Z.(p
Beachwood	ОН	44122	Essen	Germany	45127
Alfred Oberholz			Director Name Carl Voigt		
Sirce Address Bennigsenplatz 1			Sired Address Weiß frauenstraße 9		
Dusseldorf	State	Zip	City	State	<i>Τ.</i> φ
	Germany	40474	Frankfurt	Germany	D-60311
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
Number of Shares Class/Series Par Value			ISSUED SHARES		
Think to the total to the total tota	CHANACHES	rar vante	Number of Shares	Class/Scries	Par Value
10,000,000 COMM \$1.00 PAR VALUE			30,400	СОММ	\$1.00
This report must be si	igned in ink by cithe	r the President, Vice P	resident, Secretary, Assistant	Secretary, Treasurer, F	Receiver or Trustee
	*134852				at I have examined this report
File Date			including any accompanying schedules and statements, and that all statements contained herein are true and correct.		
Check No82821			Signature of Officer Date JAMES 5-0656		
By:			Print or Type Name of Officer		
FOR SECRETARY OF STATE USE ONLY			ASSISTANT SECRETARY Title of Officer		



FOR SECRETARY OF STATE USE ONLY

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PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ____

2004 Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 134852 **Degussa Corporation** 3. Street Address Principal Business Office State 379 Interpace Parkway Parsippany 07054 NJ 4. Business Phone No. 5. State of Incorporation 6 SIC Code 973-541-8584 **ALABAMA** 7. Brief Description of the Character of Business Conducted in Rhode Island SPECIALTY CHEMICALS MANUFACTURING 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name John C. Salvatore Peter A. Vinocur Street Address Street Address 23700 Chagrin Blvd. 23700 Chagrin Blvd. State 7.φ Cleveland 44122 Cleveland Secretary Name Treasurer Name Assistant Secretary Peter A. Vinocur James S.<u>Olsen</u> Street Address Sircei Address 23700 Chagrin Blvd. 379 Interpace Parkway 2.Ip Cleveland OH 44122 Parsippany 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS John C. Salvatore Hans-Joachim Kollmeier Street Address 23700 Chagrin Blvd. Goldschmidtstrasse 100 Zip Cleveland Essen OH Germany 45127 Director Name Director Name Alfred Oberholz Thomas Schoeneberg Street Address Street Address Bennigsenplatz 1 Bennigsenplatz 1 State State Dusseldorf Germany 40474 Dusseldorf Germany 40474 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 10,000,000 COMM \$1.00 PAR VALUE 30,400 · COMM \$1.00 This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of perjury, I declare and affirm that I have examined this report. including any accompanying schedules and statements, and that all statements polymed herein are true and correct. File Date Signature of Officer Date

Title of Officer