FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2002 8:00 am Secretary of State

| DOCU | JMENT # 831462 | | (0211) | Secretary of State 05-01-2002 91564 006 ***150.00 |
|---|--|--|--|--|
| Ecol | ochem, Inc. | • | | |
| DO NOT WRITE IN THIS SPACE | | | | |
| | Place of Business tent Road t. #, etc. | 3. Mailing Address 4545 Patent R Suite, Apt. #, etc. | oad | DO NOT WRITE IN THIS SPACE |
| City & Sta Norfolk | | City & State Norfolk, VA | | 4. FEI Number Applied For 54-0947592 Not Applicable |
| 23502 | Country | 235 02 | Country | Certificate of Status Desired Status Desired Status Desired Status Desired Status Desired Status Desired |
| | | | Name | 7. Name and Address of Current Registered Agent |
| | DO NOT W | RITE | | tion Service Company (P.O. Box Number is Not Acceptable) |
| • | IN THIS SP | | Street Address | (P.O. Box Number is Not Acceptable) |
| | | AUL | | ys Street |
| | | | City Tallaha | ssee FL Zip Code 32301 |
| 8. The above | named entity submits this statement for | the purpose of changing its reg | istered office or registe | ered agent, or both, in the State of Florida. |
| SIGNATURE | Signature, typed or printed name of registery/figent a | (<u>)</u> | s its agent | 4/18/2002 |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 - May 1 After May 1, F Amended UE Make Check Payable to | | | ee is \$550.00 BR is \$61.25 | 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees |
| 11. | OFFICERS AND D | DIRECTORS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | See Attached | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE | | | TITLE | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME : | | | TITLE | , |
| STREET ADDRESS CITY-ST-ZIP | | Same for the same | NAME STREET ADDRESS CITY-ST-ZIP | DO NOT WRITE |
| TITLE NAME | | | TITLE | IN THIS SPACE |
| STREET ADDRESS CITY-ST-ZIP | |] | NAME STREET ADDRESS CITY-ST-ZIP | IN THIS GIAGE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS | | <u> </u> | TITLE NAME STREET ADDRESS | |
| 13. I hereby ce | ertify that the information supplied with th | | CITY-ST-ZIP | |

13. 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 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 attachment with an address, with all other like empowered.

SIGNATURE: [

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02 757-855-900 O

Attachment # 831462-/6429\$5

OFFICERS

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Norfolk, VA 23502

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Douglas G. Dickerson – Secretary/Treasurer

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----Virginia Beach, VA 23451

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