

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91237 048 \*\*\*158.75

**DOCUMENT # F43541**

1. Entity Name  
**PERMA-FIX OF ORLANDO, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**10100 Rocket Blvd.**

3. Mailing Address  
**1940 NW 67th Place**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Orlando, FL**

City & State  
**Gainesville, FL**

4. FEI Number  
**31-1017466**

Applied For  
Not Applicable

Zip  
**32824**

Country  
**USA**

Zip  
**32653**

Country  
**USA**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**7. Name and Address of Current Registered Agent**

Name  
**CSC**

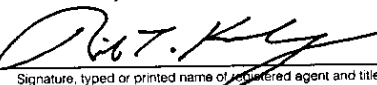
Street Address (P.O. Box Number is Not Acceptable)

**1201 Hays Street**

City  
**Tallahassee FL Zip Code 32301**

**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.

SIGNATURE  **Richard T. Kelec**

**4/19/02**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State**

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

**11. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V Sullivan, Patrick M  
6105 Masters Blvd.  
Orlando, FL 32819**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD Centofanti, Louis F.  
6075 Roswell Road, Suite 602  
Atlanta, GA 30328**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSTD Kelec, Richard T.  
1940 NW 67th Place, Ste A  
Gainesville, FL 32653**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP Randall, Roger  
620 Allegheny Drive  
Sun City Center, FL 33573**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Vice President Christopher Blanton  
3701 SW 47th Ave. #109  
Davie, FL 33314**

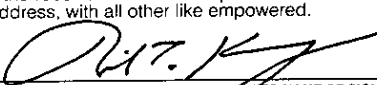
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CITY-ST-ZIP

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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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Richard T. Kelec**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/19/02**

Date

**352-395-1351**

Daytime Phone #

CR2E034B (12/01)