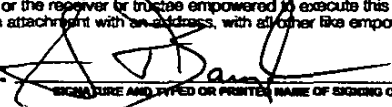


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007 8:00 am
Secretary of State

04-06-2007 90049 049 ***150.00

DOCUMENT # F43541 1. Entity Name PERMA-FIX OF ORLANDO, INC.					
Principal Place of Business 10100 ROCKET BLVD ORLANDO, FL 32824 US			Mailing Address 1940 NW 67TH PLACE GAINESVILLE, FL 32653 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 8302 Dunwoody Place			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 250			
City & State		City & State Atlanta GA			
Zip	Country	Zip 30350	Country USA	4. FEI Number 31-1017466	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CSC 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CENTOFANTI, LOUIS F 6075 ROSWELL RD., STE 602 ATLANTA, GA 30328 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Dr. Louis F. Centofanti 8302 Dunwoody Place, Suite 250 Atlanta, GA 30350 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD KELECY, RICHARD T 1940 NW 67TH PL STE A GAINESVILLE, FL 32653 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S Steve Baughman 8302 Dunwoody Place, Suite 250 Atlanta GA 30350 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEEGAN, TIMOTHY 8302 DUNWOODY PL. STE. 250 ATLANTA, GA 30350 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCNAMARA, LARRY 701 SCARBORO RD. STE 300 OAK RIDGE, TN 37830 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date: 3/29/07		
Daytime Phone #			770-587-9898		