2004 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 26, 2004 8:00 am **Secretary of State** DOCUMENT # F97000004237 01-26-2004 90005 025 ***150.00 ASPLUNDH ENVIRONMENTAL SERVICES, INC. Principal Place of Business Mailing Address 708 BLAIR MILL RD. 708 BLAIR MILL RD. 34UU0576 WILLOW GROVE, PA 19090 WILLOW GROVE, PA 19090 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052004 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 23-2859038 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. I**™** Change TITLE Delete TITLE ☐ Addition VOGEL, W. SID NAME NAME 262 BLUE ISLAND ST. STREET ADDRESS 262 BLUE ISLAND CT STREET ADDRESS CITY-ST-ZIP FAIRHOPE, AL 36532 CITY-ST-ZIP FAIRHOLE AL 36537 STD TITLE ☐ Delete TITLE ☐ Addition DWYER, JOSEPH 708 BLAIR MILL WILLOW GROVE DWYER, JOSEPH P NAME NAME STREET ADDRESS 708 BLAIR MILL RD. STREET ADDRESS CITY-ST-ZIP WILLOW GROVE, PA 19090 CITY-ST-7IP □ Delete TITLE ☐ Addition TITLE GRAHAM TR., GEORGE E NAME GRAHAM, GEORGE E JR NAME 708 BLAIR MILL RD STREET ADDRESS 708 BLAIR MILL RD STREET ADDRESS CITY-ST-ZIP WILLOW GROVE, PA 19090 CITY-ST-7IP WILLOW GROVE ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NIGHT OF SIGNING OFFICER OR DIRECTOR DAY Date Daylime Phone #