

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 31 1997 8:00am
Secretary of State

DOCUMENT # P29916

(4)

1. Corporation Name
AAA TANK TESTERS, INC.

Principal Place of Business

10 PERIMETER WAY
SUITE B-100
ATLANTA GA 30339
US

Mailing Address

10 PERIMETER WAY
SUITE B-100
ATLANTA GA 30339-3038
US



2. Principal Place of Business

21 5600 OAKBROOK PLWY

Suite, Apt. #, etc.

22 SUITE 120

City & State

23 NORCROSS, GA

Zip

24 30092

Country

25 USA

2a. Mailing Address

26 5600 OAKBROOK PLWY

Suite, Apt. #, etc.

27 SUITE 120

City & State

28 NORCROSS, GA

Zip

29 30092

Country

30 USA

3. Date Incorporated or Qualified

06/25/1990

3a. Date of Last Report

01/23/1996

4. FEI Number

58-1812050

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

PRICE, EDD
7611 S. ORANGE BLOSSOM TRAIL
SUITE 284
ORLANDO FL 30339

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME PRICE, EDD
STREET ADDRESS 10 PERIMETER WAY, SUITE B100
CITY - ST - ZIP ATLANTA GA

TITLE S ☐ DELETE

NAME PRICE, LYNN
STREET ADDRESS 10 PERIMETER WAY, SUITE B100
CITY - ST - ZIP ATLANTA GA

TITLE ☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 5600 OAKBROOK PLWY, STE 120
1.4 CITY - ST - ZIP NORCROSS, GA

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 5600 OAKBROOK PLWY, STE 120
2.4 CITY - ST - ZIP NORCROSS, GA

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/97

Date

Daytime Phone #

0012250

CR2E034 (9/96)