2007 FOR PROFIT CORPORATION

ANNUAL REPORT (AR) FILED Feb 22, 2007 08:00 All Secretary of State DOCUMENT # \$85104 1. Entity Namo A & E GEOTECHNICAL, INC. Principal Place of Business Mailing Address 9600 KOGER BLVD 9600 KOGER BLVD STE 235 STE 235 ST PETERSBURG FL 33702 ST PETERSBURG FL 33702 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & Stato City & State 4. FEI Number Applied For 59-3091373 Not Applicable Zip Country 7in 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 Name GUNASEKAREN, RANGASAMY Street Address (P.O. Box Number is Not Acceptable) 9600 KOGER BLVD STE 235 ST PETERSBURG FL 33702 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete THLE Addition U00000644180 GUNASEKARAN, RANGASAMY NAME 03/02/07-80031-025 150.00 9600 KOGER BLVD., #235 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33702 CITY ST-ZIP CITY-SI-ZIP IIILE Delete THLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZiP CITY-ST-7IP DILE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-ZIP TITLE ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete ☐ Change Addition STREET ADDRESS STREET ADDRESS

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

ME

Delete

NGA-SAMY GUNASEKARAA) 2-20-07

Addition