2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003897

NOLEN, MARCUS

410 COLBY AVE

EUFAULA, AL 36027

Name:

Address:

City-St-Zip:

Entity Name: BUILDING & EARTH SCIENCES, INC

FILED Aug 18, 2009 Secretary of State

_many man		o a Extrinocience, inc.		
Current Principal Place of Business:			New Principal Place of Business:	
5545 DER BIRMINGH	BY DRIVE HAM, AL 3521	0		
Current Mailing Address:			New Mailing Address:	
5545 DER BIRMINGH	BY DRIVE HAM, AL 3521	0		
FEI Number	: 63-1195354	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of (Current Registered Agent:	Name and Address of New Registered Agent:	
1203 GOV SUITE 101	ERNOR'S SQ			
	named entity e of Florida.	submits this statement for the p	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
Electronic Signature of Registered Ager			ent	Date
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (BHATE, DEEP, 312 BRADFOR TRUSSVILLE,	RD CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP (COWEN, JEFF 4547 CAYCE L BIRMINGHAM,	ANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ADAMS, ROBE	RACE CIRCLE N.W.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	VP () Delete	Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JEFFREY COWEN VP 08/18/2009