2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 28, 2005 8:00 am Secretary of State 03-28-2005 90047 015 ***150.00

| 1. Entity Name ENVIRONMENTAL SERVICE SYSTEMS, INC. | | | | 03-28-2003 | 30047 GIS 130.00 | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--|
| Principal Place of Business | | Mailing Address | Mailing Address | | | |
| 1421 SOUTHWEST 82 CT MIAMI, FL 33144 | | 1421 SOUTHWEST 82 CT MIAMI, FL 33144 | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 03092005 Chg-P | CR2E034 (10/03) | |
| City & State | | City & State | | 4. FEI Number 59-1533945 | Applied For Not Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| | 6. Name and Address of Curre | nt Registered Agent | Name | 7. Name and Address of New I | Registered Agent | |
| GLAUSER, STUART | | | | | | |
| 12910 SW 84TH STREET MIAMI, FL 33183 | | | Street Address | s (P.O. Box Number is Not Acceptable | ie) | |
| 1010 (141), 1-6 | 30100 | | 14446 | . W. Dixie H | highway | |
| 4 | | | City M 5 | Am: | FL 2200 | |
| | named entity submits this statement ions of registered agent. | t for the purpose of changing its | s registered office or regist | ered agent, or both, in the State of Fl | lorida. I am familiar with, and accept | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinctating) DATE | | | | | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550 | 9. Election Campa D.00 Trust Fund Con | · · · · | 5.00 May Be ided to Fees | | |
| 10. | OFFICERS AN | ND DIRECTORS | 11. | ADDITIONS/CHANGES TO OF | FICERS AND DIRECTORS IN 11 | |
| TITLE NAME | P SOLOMON,EUGENE L. | ☐ Delete | TITLE NAME | | ☐ Change ☐ Addition | |
| STREET ADDRESS CITY-ST-ZIP | 1421 SOUTHWEST 82 CT MIAMI, FL 33144 | | STREET ADDRESS CITY-ST-ZIP | | | |
| THILE | S | ☐ Delete | TIBLE | | ☐ Change ☐ Addition | |
| NAME STREET ADDRESS | SOLOMON, BARBARA 1421 SOUTHWEST 82 CT | | NAME STREET ADDRESS | | | |
| CITY-ST-ZIP | MIAMI, FL 33144 | | CITY-ST-ZIP | | | |
| TITLE | ے بھی ہ | Delete | TITLE | ~ | Change Addition | |
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| TITLE NAME | | Delete | TITLE NAME | | Change Addition | |
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| CITY-ST-ZIP | | | CITY-ST-ZIP | | Change | |
| TITLE NAME | | ☐ Delete | TITLE NAME , | | ☐ Change ☐ Addition | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | pertify that the information supplied a | vith this filing goes not qualify (| CITY-ST-ZIP | Section 119.07(3)(i), Florida Statutes. | Lighther certify that the information | |
| indicated | on this report or supplemental repor poration or the receiver or thustee en or on an attachment with an addres | rt is true and accurate and that appowered to execute this repor is, with all other like empowered | my signature shall have the | e same legal effect as if made under 07, Florida Statutes; and that my nam | oath; that I am an officer or director ne appears in Block 10 or Block 11 if | |
| | - Julin | 6 / 2000 | | IM MARAIL 7 | ms 201264741 | |

EUGENE L. SOLOMON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:\