SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. APPROVED AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DEC 23 AN 11: 03 DIVISION OF CORPORATIONS 1996 AMENDED RETURN DOCUMENT #55 SECRETARY OF STATE TALLAHASSEE. FLORIDA PAN AMERICAN SURVEYS, INC. Principal Place of Business Mailing Address 14260 S.W. 136th St 14260 S.W. 136th St. UNIT 20 UNIT 20 Miami, FL 33186 33186 Miami, FL3a. Date of Last Report 3. Date Incorporated or Qualified 1996 2. Principal Place of Business 301 Haverhill Rd 2a. Mailing Address 4. FEI Number Applied For 59-1782914 21 26 P.O. Box 10008 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Cocoa Florida 28 Cocoa Florida Added to Fees 23 Trust Fund Contribution Country Country 8. This corporation has liability for intangible tax under s. 199.032, 32927 Brevard 32927 Brevard 29 Florida Statutes Yes No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Roger J. Molitor DONALD A. WALKER 82 Street Address (P.O. Box Number is Not Acceptable) 14260 S.W. 136th St. 83 Unit 20 Miami, 33186 FL84 City Zio Code 7 Cocoa 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 of pint, 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 e of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO 13. Change X Addition **X** DELETE 1.1 TITLE D/P/V TITLE D/P/S/T/V NAME 1.2 NAME CR2E034 D.A. Walker Roger J. Molitor STREET ADDRESS 1.3 STREET ADDRESS 14260 S.W. 136th St 301 Haverhill Road CITY - S1 - ZIP 1.4 CITY-ST-ZIP Miami, FL 33186 Cocoa, FL 32927 X DELETE Change Addition TITLE 2.1 TITLE S/T NAME 2.2 NAME C.H. Walker STREET ADDRESS 2.3 STREET ADDRESS 14260 S.W. 136th St City - ST- 2if 2. 4 CITY - ST - ZIP Miami, FL 33186 DELETE 3.1 TITLE Change Addition m. 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-7IP OTY-\$1-Z# TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME 800002040458---0 -12/30/96~-01008~-011 STREET ADDRESS 4.3 STREET ADDRESS \*\*\*\*\*61,25 \*\*\*\*\*61.25 CITY - ST - ZIF 4.4 CITY - ST - ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME STREET ADDRÉSS 5.3 STREET ADDRESS C(TY - S) - ZIP 5.4 CITY - ST - ZIP DELETE TILLE 61 TITLE NAMÉ 6.2 NAME STREET AT PRESS 6.3 STREET ADDRESS 64 CITY - ST-ZIP CITY-ST-Z 14. Loc hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I fur the 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 mallie 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 12/5/96 (407) 639-1920 Date Daytime Phone #

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