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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

632215

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MOTE ENVIRONMENTAL SERVICES, INC.

FILED Feb 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1800 THOMPSON PKWY 1600 THOMPSON PKWY SARASOTA FL 34236 SARASOTA FL 34236 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/04/1979 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-1930307 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired X 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. □ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JOHNSON, ROBERT M. 27 S ORANGE AVENUE 62 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 83 84 City **B5** 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ___ Change Addition TITLE 1.1 7(1).6 MAHADEVAN, SELVAKUMARAN 1.2 NAME CR2E034 NAME 1600 THOMPSON PARKWAY STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE LEGORE, RICHARD S NAME 2.2 NAME 1600 THOMPSON PARKWAY STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE Addition TITLE 3.1 TITLE AYERS, DENA J NAME 3.2 NAME 1600 THOMPSON PARKWAY STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition PIERCE, RICHARD 4 2 NAME NAME 1600 THOMPSON PARKWAY STREET ADDRESS 4.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETÉ Addition 6.1 TITLE Change TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I heraby 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 of 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 officer or director of the corpo an attachment with an address.

64 CITY-ST-ZIP

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