## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000003132

Entity Name: TSB NUCLEAR ENERGY SERVICES INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4350 NORT	THERN PIKE TILLE, PA 1514				•	
Current Mailing Address:				New Mailing Address:		
4350 NORTHERN PIKE MONROEVILLE, PA 15146			1330 BEULAH ROAD PITTSBURGH, PA 15235			
FEI Number: 52-2140933 FEI Number Applied For ( ) FEI Number		FEI Nun	nber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1200 SOUT	DRATION SYS H PINE ISLAN DN, FL 33324					
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.						
SIGNATURE:						
	Electroni	c Signature of Registered Agent				Date
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	EDWARDS, JOH 1100 DARESBUI			Title: Name: Address: City-St-Zip:	YASUHARU, Ì 4350 NORTH	
Title: Name: Address: City-St-Zip:	SHUTTLEWORT 1100 DARESBUI			Title: Name: Address: City-St-Zip:	KAZUMASA, Ü 4350 NORTH	
Title: Name: Address: City-St-Zip:	D () DUNCAN, IAN B 4350 NORTHERI MONROEVILLE,			Title: Name: Address: City-St-Zip:	TRITCH, STE 4350 NORTH	
Title: Name: Address: City-St-Zip:	D () I GRECO, ANTHO 4350 NORTHERI MONROEVILLE,	N PIKE		Title: Name: Address: City-St-Zip:	(	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () I TRITCH, STEPH 4350 NORTHERI MONROEVILLE,	N PIKE		Title: Name: Address: City-St-Zip:	COATES, RAI 4350 NORTH	
Title: Name: Address: City-St-Zip:	D (X) COATES, F. RAN 4350 NORTHERI MONROEVILLE,	N PIKE		Title: Name: Address: City-St-Zip:	(	()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: STEPHEN R. TRITCH CH 04/23/2007