

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000001516 (2)

1. Corporation Name

THERMAL ENGINEERING CONSTRUCTION SERVICES INC.



Principal Place of Business

506 CHARLOTTE WAY
LYMAN SC 29365
US

Mailing Address

PO BOX 546
LYMAN SC 29365
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/29/1995

4. FEI Number

57-1016262

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 506 CHARLOTTE HWY

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 29365-0546

29 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME GAGG, JOHNATHAN W.
STREET ADDRESS 5701 S EASTERN AVENUE, S-300
CITY-ST-ZIP LOS ANGELES CA

☒ DELETE

TITLE VGM
NAME MAOKNIS, BERNARD A
STREET ADDRESS 808 BRANCH ROAD
CITY-ST-ZIP NEWARK DE 19711

☒ DELETE

TITLE VP
NAME CYNTHIA HENNESSEE
STREET ADDRESS 307 FOXBORO LANE
CITY-ST-ZIP SPARTANBURG SC

☐ DELETE

TITLE S
NAME HARMA, LAURENCE E
STREET ADDRESS 5701 S. EASTERN AVENUE
CITY-ST-ZIP LOS ANGELES CA 90040

☐ DELETE

TITLE D
NAME GAGG, JONATHAN W
STREET ADDRESS 5701 S. EASTERN AVENUE
CITY-ST-ZIP LOS ANGELES CA 90040

☒ DELETE

TITLE D
NAME HARMA, LAURENCE E
STREET ADDRESS 5701 S. EASTERN AVENUE
CITY-ST-ZIP LOS ANGELES CA 90040

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP/GM
1.2 NAME DALE NAUGHTON
1.3 STREET ADDRESS 506 CHARLOTTE HWY.
1.4 CITY-ST-ZIP LYMAN, SC 29365

☐ Change ☒ Addition

2.1 TITLE VP/DIRECTOR
2.2 NAME IAN WRIGHT
2.3 STREET ADDRESS CALDER VALE RD
2.4 CITY-ST-ZIP WAKEFIELD, W. YORKSHIRE ENGLAND

☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE DIRECTOR
5.2 NAME ABRAHAM YARDEN
5.3 STREET ADDRESS 5701 S. EASTERN AVE.
5.4 CITY-ST-ZIP LOS ANGELES, CA 90040

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby 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 or 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

7/10/98 (864) 439-4489

CR2E034 (5/98)