FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500002357 (0)

ENVIROTEST SYSTEMS CORP.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



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|--|---|
| 2. Principal Place of Business 2. Mailling Address 2. Mailling Address 3. 36-2880300 Suite, Apt. #, etc. 2. City & State City & State City & State City & State Country 2. Country 2. Country 2. Country 2. Suite 2. Country 2. Suite Country 2. Country 2. Suite 3. State Country 2. Suite 3. Suit | Applicable Iditional ulred lay Be Fees ngible |
| Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Status Desired S8.75 Ad Fee Req | Iditional ulred lay Be Fees gible |
| Security State City & State Security Securi | ulred lay Be Fees ngible |
| Trust Fund Contribution Added to Country Zip Country Zip Country Zip Country B. This corporation owes or has paid the current year Intaractive Personal Property Tax due June 30. Yes Special Property Tax due June 30. Yes Sp | Fees gible |
| Zip Country Zip Country Zip Country Registered Agent Personal Property Tax due June 30. Yes CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the previsions of Sections 607.050? and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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 reagent, Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OF LOT RS AND DIRICTORS 12. OF LOT RS AND DIRICTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. Pursuant to the previsions of Section 607.0505, Florida Statutes. SIGNATURE SIGN | - |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 82 Street Address (P.O. Box Number is Not Acceptable) 83 PL 11. Pursuant to the previsions of Sections 607.0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 reagent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hyred or present agent and the previous and the daylet later of Florida Statutes are included when remetating) DATE 12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TILLE P MILLER, F. ROBERT STREET ADDRESS CITY-ST-ZIP SUNNYVALE CA 94088 14. City-ST-ZIP DELETE 21. ITILE Change | |
| 1201 HAYS STREET TALLAHASSEE FL 32301 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Co 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 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or presed agent and titled applicable. OF FICE HS AND DIRECTORS TITLE P | |
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| Signature. Nyerol car product name of trap-seried agent and Flife diagrals. (NOTE: Registered Agent signature required when reinstating) 12. OFFICE BS AND DIRECTORS TITLE P DELETE 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE \$\begin{array}{cccccccccccccccccccccccccccccccccccc | |
| TITLE | |
| NAME MILLER, F. ROBERT 1.2 NAME STREET ADDRESS 246 SOBRANTE WAY 1.3 STREET ADDRESS CITY-ST-ZIP SUNNYVALE CA 94088 1.4 CITY-ST-ZIP TITLE EV DELETE 2.1 TITLE Change | |
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| TITLE EV DELETE 2.1 TITLE Change | |
| | Addition |
| NAME TAYLOR, LARRY 22 NAME | |
| 23 STREET ADDRESS | |
| CITY-ST-ZIP SUNNYVALE CA 94086 2 4 CITY-ST-ZIP | |
| | Addition |
| NAME MODI, RAJ 32 NAME | |
| STREET ADDRESS 246 SOBRANTE WAY 3.3 STREET ADDRESS | |
| CITY-ST-ZIP SUNNYVALE CA 94088 3.4. CITY-ST-ZIP | |
| DAMENDONE OFFICE O | Addition |
| AMAN BOOK! FROE RD OTE ALA | |
| DETLICONA AND 20047 | |
| | Addition |
| NAME GELFOND, RICHARD L 52 NAME | |
| STREET ADDRESS 110 EAST 59TH STREET, SUITE 2100 5.3 STREET ADDRESS | |
| CITY-ST-ZIP NEW YORK NY 10022 54 CITY-ST-ZIP | |
| TITLE D DELETE 61 TITLE Change | Addition |
| NAME DUGGER, EDWARD III 62 NAME | |
| STREET ADDRESS 711 ATLANTIC AVENUE, 3RD FLOOR 63 STREET ADDRESS | |
| CITY-ST-ZIP BOSTON MA 02111 64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filmo does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the in- | |

1. Thereby certify that the information supplied with this titing does not quality 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 accurage 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 evaluate 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.

NAMEDIA

CR2E034 (10/97