2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 05, 2001 8:00 am Secretary of State DOCUMENT # **F98000002256** CONTROLLED BLASTING, INC. 03-05-2001 90315 002 ***158.75 Mailing Address Principal Place of Business 3025 JONES MILL RD. 3025 JONES MILL RD. NORCROSS GA 30071 NORCROSS GA 30071 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 58-1399808 Not Applicable \$8.75 Additional Zip Country Country Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees \mathbf{M}' (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS ☐ Addition TITLE Change Delete TITLE NAME NAME POLLOCK, EDWARD S STREET ADDRESS STREET ADDRESS 3025 JONES MILL RD. CITY-ST-ZIP CITY-ST-ZIP NORCROSS GA 30071 Change ☐ Addition ☐ Delete TITLE TITLE Jones Frances M. NAME NAME JONES, FRANCES M 3025 Jones MIN KL STREET ADDRESS STREET ADDRESS 3025 JONES MILL RD. Vercross 61 30071 CITY-ST-ZIP CITY-ST-ZIP NORCROSS GA 30071 Change Addition TITLE TITLE ☐ Delete GILMORE, LAWRENCE E NAME NAME STREET ADDRESS STREET ADDRESS 3025 JONES MILL RD. CITY-ST-ZIP CITY-ST-ZIP NORCROSS GA 30071 ☐ Change Addition ☐ Delete TITLE TITI F ٧D NAME NAME DAUGHDRILL, CURTIS R STREET ADDRESS STREET ADDRESS 3025 JONES MILL RD. CITY-ST-ZIP CITY-ST-ZIP NORCROSS GA 30071 Change ☐ Addition TITLE ☐ Delete TITLE Griffies, Hiram F. 3025 Jones Mill Rd NAME NAME GRIFFIES, HIRAM P STREET ADDRESS STREET ADDRESS 3025 JONES MILL RD. CITY-ST-ZIP Norcross, GA 30071 CITY-ST-ZIP NORCROSS GA 30071 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2/27/01 (770)448-

Daytime Phone #