2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2006
Secretary of State

DOCUMENT# F98000002256

Entity Name: CONTROLLED BLASTING, INC.

Current Principal Place of Business:

3025 JONES MILL RD.
NORCROSS, GA 30071

New Principal Place of Business:

Current Mailing Address:

3025 JONES MILL RD.
NORCROSS, GA 30071

New Mailing Address:

FEI Number: 58-1399808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	STD	( ) Delete
Name:	JONES, FRANCES M	
Address:	3025 JONES MILL RD	
City-St-Zip:	NORCROSS, GA 30071	
Title:	D	( ) Delete
Name:	POLLOCK, EDWARD S	
Address:	700 COPA D'ORO	
City-St-Zip:	MARATHON, FL 330505403	
Title:	CP	( ) Delete
Name:	GILMORE, LAWRENCE E	
Address:	3025 JONES MILL RD.	
City-St-Zip:	NORCROSS, GA 30071	
Title:	D	( ) Delete
Name:	FRITZ, MICHAEL A	
Address:	2312 TOWNE LAKE HEIGHTS	
City-St-Zip:	WOODSTOCK, GA 301894249	
Title:	VD	( ) Delete
Name:	DAUGHDRILL, CURTIS R	
Address:	3025 JONES MILL RD	
City-St-Zip:	NORCROSS, GA 30071	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	FRITZ, MICHAEL A	
Address:	3035 JONES MILL RD.	
City-St-Zip:	NORCROSS, GA 30071	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: FRANCES M. JONES ST 04/04/2006

Electronic Signature of Signing Officer or Director — Date