2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2012
Secretary of State

DOCUMENT# F99000006083

Entity Name: APPLIED MEASUREMENT PROFESSIONALS, INC.

Current Principal Place of Business:

18000 W. 105TH ST
OLATHE, KS 660617543 US

New Principal Place of Business:

Current Mailing Address:

18000 W. 105TH ST
OLATHE, KS 660617543 US

New Mailing Address:

FEI Number: 48-0940267 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: T
Name: JORDAN, HARRY E
Address: 9832 OVVERBROOK RD
City-St-Zip: LEAWOOD, KS 66206

Title: D
Name: REGNIER, ROBERT D
Address: 11935 RILEY
City-St-Zip: OVERLAND PARK, KS 66225

Title: D
Name: HAYES, JAMES H MHA
Address: 19730 ENCINO BROOK
City-St-Zip: SAN ANTONIO, TX 78259

Title: S
Name: RUPPEL, GREGG L RRT
Address: 3635 VISTA AT GRAND
City-St-Zip: SAINT LOUIS, MO 63104

Title: P
Name: SMITH, GARY A
Address: 18000 W 105TH ST.
City-St-Zip: OLATHE, KS 660617513

Title: D
Name: GOLDINER, PAUL L MD
Address: 7 HAWTHORNERD
City-St-Zip: LARCHMONT, NY 10538

I hereby 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 all other like empowered.

SIGNATURE: GARY A. SMITH PRES 03/15/2012

Electronic Signature of Signing Officer or Director — Date