## 2005 FOR PROFIT CORPORATION

ANNUAL REPORT				Secretary of State			
1. Entity Nam				Secret	tary of S	State	
MANHAT	TAN ENVIRONMENTAL INC	• · · · <u>- · · · · · · · · · · · · · · · ·</u>					
Principal Plac	e of Business	Mailing Address		l			
		5601 S 122ND EAST AVE TULSA, OK 74146					
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r	O NOT WRITE	IN THIS SPA	CE	04212005	No Chg-P	CR2E034 (10	<u> </u>
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					f Status Desired	□ <b>\$</b> 8.7	5 Additional
			<del></del>	5. Certificate 0			equired
	6. Name and Address of Current Re	gisterad Agent	·	t			, ****
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				DO I	W TON	RITE	
				IKI "I"	HIS SP	A ^ E	
				114 1	rno or	MUE	
6. The above the obligat	named entity submits this statement for the	ne purpose of changing its register	ed office or register	ed agent, or both	, in the State of Flo	rida. I am familia	with, and accept
CICNATURE				=	. 34		
SIGNATURE_	Signature, typed or printed name of registered agent and	title if applicable. (NOTE, Registere	d Agent signature required	when reinstating)		DATE	
FIL After M:	E NOW!!! FEE 18 \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		.00 May Be ed to Fees			
10.	OFFICERS AND DI	RECTORS	I			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
TITLE	C						
NAME STREET ADDRESS	GEISINGER, JIM B 5601 S 122ND EAST AVE						
City-ST-ZIP	TULSA, OK 74146						
TITLE	VD		1				
NAME	GIBBS, CHARLES				00000	0353962	es abendo esterni
STREET ADDRESS CITY-ST-ZIP	5601 S 122ND EAST AVE TULSA, OK 74146		ł		05/03/05:	-8008+-02	2 15U.UU
TITLE	P	<u></u>			Strate a sales of the Strate and	581.8 GENERAL E. F.	111 x 44
NAME	RAINS, BOB						
STREET ADDRESS	5601 S 122ND EAST AVE			no i	NOT W	DITE.	
CITY-ST-ZIP	TULSA, OK 74146	<u> </u>		'-			
title Name	S LAWSON, JIM		1	IN T	'HIS SP	ACE	
STREET ADDRESS	5601 S 122ND EAST AVE			-, -			
CITY-ST-ZIP	TULSA, OK 74146		ŀ				<i>,</i> .
TITLE	T		1				
NAME OTOGET ADDRESS	BROWN, RAY						
STREET ADDRESS CITY-ST-ZIP	5601 S 122ND EAST AVE TULSA, OK 74146						_

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Ray Brown Ray Brown SIGNATUSE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR CHECTOR