2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000031758

Entity Name: ACCESS ENVIRONMENTAL ASSOCIATES, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|---|--|---------------------------------------|---|--|--------------------------------------|--|
| SUITE 4 | BEAM ROAD VILLE, FL 322 | 57 | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| SUITE 4 | BEAM ROAD VILLE, FL 322 | 57 | | | | |
| FEI Number: | : 59-3636732 | FEI Number Applied For () | FEI Number Not Appl | icable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| SUITE 230 JACKSON The above in the State | VILLE, FL 322 named entity se of Florida. | 02 US | ourpose of changing i | ts registered | office or registered agent, or both, | |
| SIGNATUR | | ic Signature of Registered Age | ant | Date | | |
| This corner | | satisfy its Intangible Tax filing req | | to so (X) | Date | |
| | | Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () FAUST, EARL 9350 ZAMBITO JACKSONVILLI | | Title: Name: Address: City-St-Zip: | (|) Change () Addition | |
| Title: Name: Address: City-St-Zip: | S () FAUST, ELIZAE 9350 ZAMBITO JACKSONVILLE | ROAD NORTH | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | V () NAPIER, JONA 11503 PINE FO JACKSONVILLI | REST CT. | Title: Name: Address: City-St-Zip: | NAPIER, JON 12594 DUNRA | | |
| Title: Name: Address: City-St-Zip: | T () NAPIER, CHAN 11503 PINE FO JACKSONVILLI | REST CT | Title: Name: Address: City-St-Zip: | NAPIER, CHA 12594 DUNRA | | |

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHANDA NAPIER T 04/30/2002