2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2009
Secretary of State

DOCUMENT# P02000073053

Entity Name: GEOTECHNIQUES INTERNATIONAL, INC.

Current Principal Place of Business:

400 E COLONIAL DR STE
SUITE 209
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

400 E COLONIAL DR STE 209
ORLANDO, FL 32803

New Mailing Address:

400 E COLONIAL DR STE
SUITE 209
ORLANDO, FL 32803

FEI Number: 33-1011081 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WISSA, ANWAS E Z .
400 E COLONIAL DR STE 209
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

WISSA, ANWAS E Z .
400 E COLONIAL DR
SUITE 209
ORLANDO, FL 32803 US

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: 01/31/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WISSA, ANWAR Z .
Address: 400 E. COLONIAL DR. SUITE 209
City-St-Zip: ORLANDO, FL 32803

Title: S ( ) Delete
Name: WISSA, SHAKIR
Address: 400 E. COLONIAL DR. SUITE 209
City-St-Zip: ORLANDO, FL 32803

Title: T ( ) Delete
Name: WISSA, ANWAR
Address: 400 E. COLONIAL DR, SUITE 209
City-St-Zip: ORLANDO, FL 32803

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:

I hereby certify that the information supplied with this filing does not qualify 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: ANWAR E Z WISSA DR. 01/31/2009
Electronic Signature of Signing Officer or Director — Date