2005 FOR PROFIT CORPORATION

changed, or on an attachment with

May 25, 2005 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P04000060429** 05-25-2005 90003 026 ***150.00 1. Entity Name RICHART ENVIRONMENTAL, INC. Principal Place of Business Mailing Address 1701 MIKLER RD 1701 MIKLER RD OVIEDO, FL 32765 OVIEDO, FL 32765 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. CR2E034 (10/03) 05102005 Applied For City & State 4. FEI Number 20-1014553 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICHART, SEAN DAVID Street Address (P.O. Box Number is Not Acceptable) 1701 MIKLER RD **OVIEDO, FL 32765** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) Sonature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!!- FEE IS \$150.00 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. TITLE ☐ Change ■ Addition ☐ Delete TITLE NAME RICHART, SEAN NAME STREET ADDRESS STREET ADDRESS 1701 MIKLER RD OVIEDO, FL 32765 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 passes empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Sean D. Richart 5/20/03

FILED