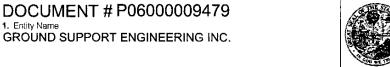
2007 FOR PROFIT CORPORATION ANNUAL REPORT





FILED Apr 16, 2007 8:00 am Secretary of State 04-16-2007 90084 032 ***150.00

GROUND SOLL OVER ENGINEERING INC.						
Principal Place of Business 5200 CRANE ROAD WEST MELBOURNE, FL 32904 US Mailing Address 5200 CRANE ROAD WEST MELBOURNE, FL 32904			2904 US	- Anneonia		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04112007 Chg-P	CR2E034 (12/06)	
City & State		City & State		4. FEI Number 4/40	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desir	\$8.75 Additional	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
SCHMĪDT, JANET			Name	Name		
5200 CRANE ROAD WEST MELBOURNE, FL 32904		Street Add		ss (P.O. Box Number is Not Acceptable)		
,						
			City		FL 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.						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	***************************************		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE ,	DIR SCHMIDT, ROBERT	☐ Delete	TITLE NAME		☐ Change ☐ Addition	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP	ZIP WEST MELBOURNE, FL 32904 CITY		CITY-ST-ZIP			
TITLE NAME		☐ Delete	TITLE		Change Addition	
STREET ADDRESS	·		NAME STREET ADDRESS		i	
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
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CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME			NAME			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY - ST - ZIP			
	Certify that the information expelied with	this files does not suplify for t	■ ****		A - I f and a - mile at a talk a factor and	

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.