2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000068539

Entity Name: HANNAN ENVIRONMENTAL SERVICES, INC.

FILED Oct 27, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

4141 BANDY BLVD SUITE B-11 FT. PIERCE, FL 34981

Current Mailing Address: New Mailing Address:

PO BOX 7519 PO BOX 14920

PORT ST LUCIE, FL 34985 FORT PIERCE, FL 34979

FEI Number: 65-1312331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HANNAN, JAMES 4141 BANDY BLVD SUITE B-11 FT PIERCE, FL 34981 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: JAMES HANNAN

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 HANNAN, JAMÉS
 Name:
 HANNAN, JAMÉS

 Address:
 PO BOX 7519
 Address:
 PO BOX 14920

City-St-Zip: PORT ST LUCIE, FL 34985 City-St-Zip: FORT PIERCE, FL 34979

Title: VP (X) Delete Title: () Change () Addition

 Name:
 HANNAN, TRACIE
 Name:

 Address:
 PO BOX 7519
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34985
 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: JAMES HANNAN P 10/27/2008