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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

NUCLE	MENT # P2762 Name EIC ASSAYS CORPORATION	\'			
Principal Place	of Business	Mailing Address			41 B.IB. B.IB.I 81811 B.IB.I B.IB.I BIB.I 81811 [EB]
	ST AND FL 32034	RT 3 BOX 106-1 MONTCELLO FL 32	344		
US				3. Date Incorporated or Qualified 01/02/1990	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	04/19/1995
1		26		59-2959331	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
☐ City & State)	City & State		6. Election Campaign Financing	55.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Ζιρ 4	Country	Zip	Country	8. This corporation has liability for	
11.	25 9, Name and Address of Curre	29	30	. I	□No
	5. Hame and Addiose of Oane	ant Hegistered Agent	81 Name	10. Name and Address of New F	registered Agent
SAUND	ERS, MARY S.				
	DX 106-1		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
	ELLO FL 32344		83		
			84 City		FL 85 Zip Code
14 Durquent to	a the provinces of Castions FOZ AFA	0 CO7 4500 Fire-i Ot-4			
SIGNATURE _	n, and accept the obligations of, sec	ction 607.0505, Florida Statut	es.	ration submits this statement for the pur ord of directors. I hereby accept the app	
SIGNATURE _	Signature, typed or printed name of registered ago-	nt and fide if applicable.	es. NOTE: Registered Agent signature require	od withen reinstating!	DATE
SIGNATURE _	Signature, typed or printed name of registered ago-	ction 607.0505, Florida Statut	NOTE: Registered Agent signature require	od wiften reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
SIGNATURE _	Signature, typed or printed name of registered agor OFFICERS AN VO PEGG, R. KEVIN	m and title if applicable. ND DIRECTORS	NOTE: Registered Agent signature require 13. 1.1 TILE 1.2 NAME	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12 Change Addition
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SIGNATURE: Mery Steemen