2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 25, 2000 8:00 am Secretary of State DOCUMENT # **P28371** ENVIRONMENTAL SYSTEMS PRODUCTS, INC. 01-25-2000 90117 019 ***150.00 Mailing Address Principal Place of Business 7 KRIPES RD. 7 KRIPES RD. EAST GRANBY CT 06026 EAST GRANBY CT 06026-9720 2. Principal Place of Business 3. Mailing Address $\mathcal{Q} = i$ Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 06-1285832 Not - Zip Country . Zip Country \$8.75 Additional 5. Certificate of Status Desired ---Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 at 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 MRPES 10 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 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be ·Tax filing requirement and elects to do so... After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE ☐ Change ☐ Addition TITLE ☐ Delete HAFTMAN, SCOTT NAME NAME STREET ADDRESS STREET ADDRESS 7 KRIPES RD. CITY-ST-ZIP CITY-ST-ZIP E. GRANBY CT M Change ☐ Addition **EVPC** ☐ Delete TITLE correct Last name is webb NAME Web -Loebb, Richard NAME STREET ADDRESS STREET ADDRESS 7 KRIDES ROAD CITY-ST-ZIP CITY-ST-ZIP E. GRANBY CT 06026-9720 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME MCKENNA, TERRENCE P STREET ADDRESS STREET ADDRESS 7 KRIPES RD CITY-ST-ZIP CITY-ST-ZIP EAST BRANBY CT **EVPC** TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME LANGEVIN, DAVID NAME STREET ADDRESS STREET ADDRESS **7 KRIDES ROAD** CITY-ST-ZIP CITY-ST-ZIP E. GRANBY CT 06026-9720 **EVP** ☐ Change ☐ Addition Delete TITLE TITLE NAME TEDESCH I, RINALDO STREET ADDRESS STREET ADDRESS 7 KRIPES ROAD CITY-ST-ZIP CITY-ST-ZIP E. GRANBY CT 06026-9720 Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TRANE OSCOTT HAFTMANN V-P FINANCE 1/4/00 (860) 653-0081 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR