2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P37605 01-12-2006 90189 019 ***150.00 1. Entity Name CRS ENGINEERING, INC. Principal Place of Business Mailing Address 40001432 3504 SEVENTH AVE., SOUTH 3504 SEVENTH AVE., SOUTH BIRMINGHAM, AL 35222 BIRMINGHAM, AL 35222 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) Applied For City & State City & State 4. FEI Number 63-1057711 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INCORP SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 18450 NE 2ND AVE MIAMI, FL 33179 City Zio 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable, DATE 9. Election Campaign Financing \$5.00 May.Be FILE NOW!!! FEE IS \$150.00 -Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CB TITLE Delete TITLE Change Addition CATER, FRANK M. NAME NAME STREET ADDRESS 3504 7TH AVE., SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM, AL Delete TITLE Change TITLE ☐ Addition NAME CATER, KEN W NAME 3504 7TH AVE., SOUTH STREET ADDRESS STREET ADDRESS BIRMINGHAM, AL CITY-ST-ZIP VΡ ☐ Delete TITLE Change - - Addition BRUNER, R SCOTT BANNER, R SCOTT NAME NAME STREET ADDRESS 3504 - 7TH AVENUE SOUTH STREET ADDRESS CITY-ST-ZIP BIRMINGHAM, AL 35222 CITY-ST-7P ☐ Delete TITE F Change Addition TITI F YORK, D. ANDREW NAME GILL, JOHN W NAME STREET ADDRESS. STREET ADDRESS 35040-7TH AVENUE SOUTH CITY-ST-ZIP BIRMINGHAM, AL 35222 CITY-ST-ZIP TITLE ☐ Delete IIIE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling 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 y ustyle 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 attact junt with an oldress, with all other like empowered.

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Jan 12, 2006 8:00 am