2001 UNIFORM BUSINESS REPORT (UBR)

Apr 28, 2001 8:00 am Secretary of State DOCUMENT # P93000047003 PROFESSIONAL ENGINEERING AND ENVIRONMENTAL TESTI 04-28-2001 90086 032 ***158.75 Principal Place of Business Mailing Address 1312 NEPTUNE DR 1312 NEPTUNE DR **BOYNTON BEACH FL 33426** BOYNTON BEACH FL 33426 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0421160 Not Applicable 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 IOSSI, RICHARD G Street Address (P.O. Box Number is Not Acceptable) 1310 NEPTUNE DRIVE **BOYNTON BEACH FL 33426** Zip Code City Fl 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 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 11. 12. CR2E034 (10/00) ☐ Delete ☐ Change TITLE NAME ROUSE, JANET H. NAME STREET ADDRESS STREET ADDRESS 1312 NEPTUNE DR CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL** TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROUSE, JACK G NAME NAME STREET ADDRESS STREET ADDRESS 1312 NEPTUNE DR CITY-ST-ZIP CITY-ST-ZIP BOYNTON BEACH FL ■ Addition ☐ Change TITLE ☐ Defete NAME ROUSE, JACK G NAME STREET ADDRESS STREET ADDRESS 1312 NEPTUNE DR CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BCH FL** ☐ Change ☐ Addition ☐ Delete TITLE TITLE IOSSI, RICHARD E NAME NAME STREET ADDRESS STREET ADDRESS 1310 NEPTUNE DRIVE CITY-ST-ZIP CITY-ST-ZIE **BOYNTON BEACH FL 33426** ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF 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.

SIGNATURE:

Richard 6. Iossi

AME OF SIGNING OFFICER OR DIRECTOR

4/23/01

561-136-4900

Daytime Phone #