FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

DIVISION OF CORPORATIONS

Secretary of State

1996

| DOCUMENT # P9400002046 (8) 1. Corporation Name EARTH SYSTEMS GROUP, INC. | | | | | | | | | |
|--|---|--|---|--------------|------------------------------------|--|---|--|--------------------------------------|
| | m ororemo anour, ma | , , | | | | 1 288 /1881 118 187/1 818/1 88/11 | 1 1 1 1 1 1 1 1 1 1 1 | 1 3 111 13 11 0 111 | Ara donin didin diala di |
| Principal Place | e of Business | Mailing Address | | | | | | | |
| 528 N 1ST ST 528 N 1ST ST | | | | | | | | | |
| JACKSON | VILLE FL 32250 | JACKSONVILLE FL | 32250 | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified | 3a. (| Date of Las | Report |
| 2. Principa! Pl | lace of Business | A- 14-7 | | | | 01/03/1994 | | | /1995 |
| 21 | acc of business | 2a. Mailing Address | | | | 4. FEI Number 59-3216003 | | | Applied For |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | ····· | | | | | - ¢8 · | Not Applicable 75 Additional |
| City & State | | 27 | | | | 5. Certificate of Status Desired | | | e Required |
| 23 | v | City & State | | | | 6. Election Campaign Financing | | \$5. | .00 May Be |
| Zip | Country | Zip | Cour | ntry | | Trust Fund Contribution 8. This corporation has liability for | | | ded to Fees |
| 4 | 25 | 29 | 30 | | | Florida Statutes Yes | ☐ No | | s 199.032, |
| | 9. Name and Address of Curre | nt Registered Agent | | 641 | | 10. Name and Address of New F | egistere | d Agent | |
| SMITH | I, DAVID L | | | 81 | Name | | | | |
| 2305 (| 2305 OCEANWALK DR. W. | | | 82 | Street Address | ss (P.O. Box Number is Not Acceptab | le) | | · |
| ATLAN | ITIC BCH. FL 32233 | | ļ. | 83 | | | | | · |
| | | | - | 84 | City | | | · · · · · · · · · · · · · · · · · · · | |
| 11. Pursuant to | o the provisions of Sections 607 of or | 2 and 607 4500 Ft + 1 0 - 1 | | ٠.۱ | • | | F | | Zip Code |
| | ed agent, or both, in the State of Flori h, and accept the obligations of, Sect | da. Such change was authori ion 607.0505, Florida Statute | tes, the aboving the constant of the constant | e-n orpc | amed corporati oration's board | ion submits this statement for the pur of directors. I hereby accept the appo | ose of contract | changing its as registere | registered office and agent, I am |
| BIGNATURE _ | Signature, typed or printed riame of registered agent | and life if anclinable | of a second | | | | | | |
| 2. | OFFICERS AN | D DIRECTORS | 13. | gent | signature required w | vhen reinstaling) ADDITIONS/CHANGES TO OFFI | DATE | ID DIDEOT | |
| ITLE | DP DATE: | ☐ DELETE | 1. 1 7171 | LE | V | | | VD DIRECT | |
| AME | SMITH, DAVID L 2305 OCEANWALK DR | | 1.2 NAV | ŧE | GO | oldsberry, Gary o2 16th Street A | , | | - Par Modition |
| TREET ADDRESS | ATLANTIC BEACH FL 3223 | 2 | | | ADDRESS 120 | 02 164 Street A | <i>ا</i> ر | - 4-3 | |
| TLE | V | ⊅ DELETE | 1.4 CiTY 2. 1 TiTL | | -ZIP J9 | cksonville Beach, | 43 | 2230 | · |
| AME | SMITH, DAVID L. | | 2.1 NAM | | 67 | W VS | | Change | Addition |
| REET ADDRESS | 2305 OCEANWALK DR. | | 23 STRE | | UDORESS 23 | nith, David L. os Oceanum K De antic Beach, Fl. 3 | , . | | |
| TY-ST-ZIP | ATLANTIC BEACH FL | | 2.4 CITY | - \$1- | ZIP Atl | antic Beach, F1 3 | 223 | 3 | |
| IME | | ☐ DELETE | 3. 1 TITL | | | | | ☐ Change | Addition |
| REET ADDRESS | | | 3.2 NAM 3.3. Stri | | bosso | | | | |
| TY - \$1 - 71P | | | 3.4 CITY | | 1 | | | | |
| (LE | | ☐ DELETE | 4. 1 TITLE | _ | | | | Change | Addition |
| ME DEEL ADDRESS | | | 4.2 NAME | Ε | | | | | [_] reduited |
| REET ADDRESS Y-S1-ZIP | | | 4.3 STRE | ET AC | DDRESS | | | | |
| LF | | ☐ DELETE | 4.4 CITY - | | ZIP | | | | |
| MĒ . | • | _ Section | 5. 1 TITLE 5.2 NAME | | ĺ | | | ☐ Change | ☐ Addition |
| HEET ADDRESS | | | 5.3 STREE | | ODRESS | | | | |
| Y-ST-ZIP | | | 5.4 CITY- | | 1 | | | | |
| LE . | | ☐ DELETE | 6. 1 TITLE | | | | | ☐ Change | Addition |
| EET ADORESS | | | 62 NAME | | | | | | |
| Y·ST-ZIP | | | 6.4 CITY - | ет з | 710 | | | | |
| I do hereby o | certify that the information supplied w | ith this filing is voluntarily furni | shed and do | es r | not qualify for th | ne exemption stated in Section 119.07 | '(3)(k). Fl | orida Statur | es I further |
| oath: that La | am an officer or director of the corpora Block -12 or Bl ock 13 if changed, or or | ation or the walking and a live | | ue a to e | and accurate a execute this rer | ne exemption stated in Section 119.0; and that my signature shall have the se port as required by Chapter 607, Flori | me legal | effect as it | made under |
| | \ | an attachment with an addre | ess. | | , | | / \ | | arroy ridine |
| IGNATU | IRE: Jand A | I mell | | | | 4-26-96 | 1900 | 2110 | 17111 |
| | SIGNATURE AND TYPED OR | PRINTED NAME OF SIGNING OFFICER | R OR DIRECTOR | | | Date | (m 1/ | Paytime Phone | 0170 |