2007 FOR PROFIT CORPORATION

ANNUAL REPORT **FILED** Jan 19, 2007 08:00 AN Secretary of State **DOCUMENT # P94000040841** 1. Entity Name APPLIED ENVIRONMENTAL SOLUTIONS, INC. Principal Place of Business Mailing Address 4344 REEVES RD 4344 REEVES RD NEW PORT RICHEY, FL 34652 NEW PORT RICHEY, FL 34652 01172007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3297505 Not Applicable 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KLOSZEWSKI, STEVE DO NOT WRITE 4344 REEVES ROAD NEW PORT RICHEY, FL 34652 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PTSD TITLE NAME KLOSZEWSKI, STEVE STREET ADDRESS 4344 REEVES RD CITY-ST-7IP NEW PORT RICHEY, FL 34652 UDDDDD592869 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statut indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; an changed, or on an attachment with an accurace, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

E OF SIGNING OFFICER OR DIRECTOR

1-17-2007 727-844-3166