## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000010291 (7)

## **FILED** Feb 23 1998 8:00am Secretary of State

| ENVIRONMENTAL ENERGY FUELS, INC.   |                     |                                     |  |                                |
|--|---------------------|-------------------------------------|--|--------------------------------|
|  |                     |                                     |  |                                |
| Principal Place of Business  | Mailing Address     | - · · · -                           |  | i Baine india Lacat Kihi kesi  |
| 424 NEW AVE. NE  | 424 NEW AVE. NE     |                                     |  |                                |
| PALM BAY FL 32907 PALM BAY FL 32907  |                     |                                     | DO NOT WRITE IN THIS SPACE                             |                                |
|  |                     |                                     | 3. Date Incorporated or Qualified                      | 1                              |
|  |                     |                                     | 01/31/1997   |                                |
| 2. Principal Place of Business   | 2a. Mailing Address |                                     | 4. FEI Number  | Applied For                    |
| 21 26  |                     |                                     | 593-13 <b>-</b> 6939                                   | Not Applicable                 |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc. |                                     | 5. Certificate of Status Desired                       | \$8.75 Additional              |
| 22   |                     |                                     |  | Fee Required                   |
| 23 28 28   |                     |                                     | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be<br>Added to Fees |
| Zip Country  | Zip                 | Country                             | 8. This corporation owes or has paid the curr          |                                |
| 24 25  | 29                  | 30                                  |  | ] Yes ☐ No                     |
| 9. Name and Address of Current   |                     |                                     | 10. Name and Address of New Registered                 | \gent                          |
| SMITH, EUGENE P  |                     |                                     | ANES M. NICHOLAS                                       | RA.                            |
| 424 NEW AVE. NE  |                     | 82 Street Add                       |  |                                |
| PALM BAY FL 32907  |                     |                                     | dress (P.O. Box Number is Not Acceptable)              | CIVE                           |
|  |                     | 83 ZW                               | DIAN HARBOR WE   | Ach                            |
|  |                     | 84 City                             | FI   | 85 Zio Code                    |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chan   |                     |                                     |  | changing its registered        |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 647.0508, Florida Statutes. |                     |                                     |  |                                |
|  | Muhla               | ESQ.                                | 2/1/9  | <b>~</b>                       |
| SIGNATURE Signature, typied or printed name of registered agen   |                     | TE: Registered Agent signature requ | uired when reinstating) DATE                           |                                |
| 12. OFFICERS AND   |                     | 13.                                 | ADDITIONS/CHANGES TO OFFICERS AND                      |                                |
| TITLE DOEO   | ☐ DELETE            |                                     | ecretary   | Change X Addition              |
| NAME SMITH, EUGENE P   |                     |                                     | en Welsh   |                                |
| STREET ADDRESS 424 NEW AVE. NE   |                     |                                     | 16 Lenax Avenue, No. 3                                 |                                |
| CITY-ST-ZIP PALM BAY FL 32907  | DELETE              |                                     | aytona Beach, FL 32118'                                | Change Addition                |
| NAME SMITH, EUGENE P   | C ottent            | 1-77                                | SEE  | X                              |
| STREET ADDRESS 424 NEW AVE. NE   |                     | 1,                                  | om Appleby   |                                |
| CITY-ST-ZIP PALM BAY FL 32907  |                     |                                     | 078 Bluestem Circle, NE<br>Bluestem Circle, NE         | 1                              |
| TITLE DVS  | K DELETE            |                                     |  | Change Addition                |
| NAME ROBERT, DOUGLAS   |                     | 3.2 NAME La                         | egistered Principal, Sec. 'awrence R. Smith            |                                |
| STREET ADDRESS 424 NEW AVE. NE   |                     |                                     | 420 Babcock St., NE, Suite                             | 206                            |
| CITY-ST-ZIP PALM BAY FL 32907  |                     | 3.4. CITY-ST-ZIP Pa                 | alm Bay, FL 32905                                      |                                |
| TITLE <b>DV</b>  | ☐ DELET <b>e</b>    | 4.1 TITLE                           |  | Change Addition                |
| NAME SMITH, SANDRA J   |                     | 4. 2 NAME                           | ·  |                                |
| STREET ADDRESS 424 NEW AVE. NE   |                     | 4.3 STREET ADDRESS                  |  | 1                              |
| CITY-ST-ZIP PALM BAY FL 32907  |                     | 4.4 CITY-ST-ZIP                     |  |                                |
| TITLE  | ☐ DELETE            | 5.1 TITLE                           |  | ☐ Change ☐ Addition            |
| NAME   |                     | 5.2 NAME                            |  |                                |
| STREET ADORESS   |                     | 5.3 STREET ADDRESS                  |  |                                |
| CITY-ST-ZIP  | ☐ DELETÉ            | 5.4 CITY - ST - ZIP                 |  | Change Addition                |
| TITLE  |                     | 6.1 TITLE                           |  | C Auguste C Vaccion            |
| NAME   |                     |                                     |  |                                |
| AVOSET ADADEGO   |                     | 6.2 NAME                            |  |                                |
| STREET ADORESS CITY+ST-ZIP   | D official          |                                     |  |                                |

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.