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CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000019989 ENVIRONMENTAL & ANALYTICAL MANAGEMENT, INC. Principal Place of Business Mailing Address 23061 FLORALWOOD LANE 23061 FLORALWOOD LANE **BOCA RATON FL 33433 BOCA RATON FL 33433** OUT SUITES DO NOT WRITE IN THIS SPACE 4181 NW ISTAVO 3. Date Incorporated or Qualified 33431 03/04/1997 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 4181 NW 65-0735249 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Suite Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible 25 Raim Gran 29 339 9. Name and Address of Current Registered Agent Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent PAVLOVICS, SVEN R 23061 FLORALWOOD LANE D. Box Number is Not Acceptable) 82 **BOCA RATON FL 33433** 83 84 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 607.0505, Florida Statutes. **SIGNATURE** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. EICERS AND DIRECTORS DELETE ☐ Change ☐ Addition TITLE 1.1 TITLE 1.2 NAME NAME 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

14. 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 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 empty area to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment y in an addition. 561 416 9191

FILED

Apr 13 1998 8:00am

Secretary of State