2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 27, 2004 08:00 AM Secretary of State **DOCUMENT # P97000061651** 1. Entity Name ENVIRONMENTAL SCIENCE ASSOCIATES, INC. Principal Place of Business Mailing Address 35 JEFFERSON AVE. 35 IEFFERSON AVE. PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3462250 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MORIARTY, RICHARD DO NOT WRITE 35 JEFFERSON AVE. PONTE VEDRA BEACH, FL 32082 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 famillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and trie if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME MORIARTY, RICHARD STREET ADDRESS 35 JEFFERSON AVE. U00000133675 CITY - ST - ZIP PONTE VEDRA BEACH, FL 32082 04/27/04-80098-004 150.00 TITLE NAME STREET ADDRESS CiTY-ST-ZIP BILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes 1 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 fusite empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachiptent with an agoriess, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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