FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V37988

1. Corporation Name: ECOSMART, INC.

Principal Place of Business / Mailing Address:
555 SUN VALLEY DRIVE, STE. J-3
ROSWELL, GA 30076

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. # etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

3. Date Incorporated or Qualified: 5-19-92
3a. Date of Last Report: 8-8-95
4. FEI Number: 65-0413201 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired: X $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: X Yes ☐ No

9. Name and Address of Current Registered Agent

RICHARD MILLER
5030 CHAMPION BLVD., STE. G-441
BOCA RATON, FL 33496

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip 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 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 _____ DATE
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P / NAME / STREET ADDRESS / CITY-ST-ZIP	E. DOUGLAS GRINDSTAFF 823 TYNE BLVD. NASHVILLE, TN 37220 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition ←
TITLE V.P. / NAME / STREET ADDRESS / CITY-ST-ZIP	STEVEN M. BESSETTE. 4135 BELLFLOWER DRIVE ALPHARETTA, GA 30202 ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition ←
TITLE Sec / NAME / STREET ADDRESS / CITY-ST-ZIP	MARK G. VERNON. 1125 PRIMROSE DRIVE ROSWELL, GA 30076 ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition ← 700001789697 -04/23/96--01001--002 ***208.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DELETE ALL OTHERS! ☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 4-22-96 SR

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE: Steven M. Bessette STEVEN M. BESSETTE, V.P. 4-17-96 (770)518-1260
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #