## 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 # F93000001545 (3)

HARRIS ENVIRONMENTAL SYSTEMS, INC.

## **FILED** Feb 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									T COMPANY AND INCOME LITTER OF AN ANTILOGRAM TO		11 <b>861 \$</b>	1114 <b>515</b> 1	II BIRI ( <b>40</b> 1
11 CONNECTOR ROAD 11 CONNECTOR ROAD													
ANDOVER MA 01810				ANDOVER MA 01810					DO NOT WRITE IN THIS SPACE				
									3. Date Incorporated or Qualified				
									03/26/1993				
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			Applied For	
21				26					04-2269767	Not Applicable			
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	]			dditional quired
City & State				City & State					A Floring Committee Committee				<del>`</del>
23				28					6. Election Campaign Financing Trust Fund Contribution	1			May Be Fees
Zip Country				Zip Country				This corporation owes or has paid the current year Intangible					
24	25			29 30					Personal Property Tax due June 30.	_	Yes	_	No
9, Name and Address of Current			it Regis	Registered Agent			10. Name and Address of New F			legistered Agent			
	T CORPORAT					B1	Name						
1200 SOUTH PINE ISLAND ROAD							Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324													
						83							
						84	City			FL	85	Zip C	ode
11. Purcuant	to the provision	s of Sections 607 050	2 and 6	07 1508 Florida Statut	es the a	bove	2-name	d corpo			changi	na ite	registered
office or re agent. I a	egistered agen m familiar with,	it, or <b>b</b> oth, in the State an <b>d a</b> ccept the oblig	of Floridations of	da. Such change was a f, Section 607,05 <mark>05</mark> , Flo	authorize orida Sta	d by tutes	the co	rporatio	ration submits this statement for the purports board of directors. I hereby accept the	e appo	intmer	nt as r	egistered
SIGNATURE					<u>-</u>								
12.	Signature, typed or r	printed name of registered age OFFICERS AN					nt signatu	re required	1 when reinstating) D. ADDITIONS/CHANGES TO OFFICERS	AND	DIREC	TORS	IN 12
TITLE	P	OF TOLING AIL	DINE C	DELETE	1.1 I	ITLE			ADDITIONO/OF IANAES TO OF FIDER		Cha		Addition
NAME	HUNT, PH	IILIP W			1.2 N	AME		1	•			•	}
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CITY-ST-ZIP	ANDOVER MA 01810			1.4 CI			1-ZIP						
TITLE	VCD			DELETE	2.1 TI	TLE				Ţ	Cha	nge	Addition
NAME	MURRAY, ALEXANDER J			2.2 N			2.2 NAME						-
STREET ADDRESS				235			address						
CITY-ST-ZIP							II - ZIP	ļ					<u></u>
TITLE	VD OVER 100	MIN 4889 M 48 5		☐ DELET <b>E</b>	3.1 1					l	Cha	nge	Addition
NAME		NE, ARTHUR P			3.2 N			1					ļ
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NAME CTREET ADDRESS					4. 2 N		100000						
STREET ADDRESS	ANDOUGD MA GAGAG						ADORESS	}					
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NAME				hand Discussion	5.2 N							- 0	
STREET ADDRESS							address						
CITY-SI-ZIP						TY-ST		1					į
TITLE				DELETE	6.1 1		211	<del>                                     </del>			Cha	nge	Addition
NAME					6.2 N			1		_		-	
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP						TY-ST							

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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.