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Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90083 044 ****15.00

05-17-1999 90032 050 ***143.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000005769

1. Corporation Name
CAPE ENVIRONMENTAL MANAGEMENT INC.



Principal Place of Business 2302 PARKLAKE DRIVE, SUITE 200 ATLANTA GA 30345-2907	Mailing Address 2302 PARKLAKE DRIVE, SUITE 200 ATLANTA GA 30345-2907
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/08/1994	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 58-1639130		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation owes the current year intangible Personal Property Tax.		☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

CARLOW, DON
5796 HOFFNER AVENUE,
SUITE 607
ORLANDO FL 32822

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	V
NAME	RIOS, FERNANDO	1.2 NAME	HUTTO, DANIEL
STREET ADDRESS	2302 PARKLAKE DRIVE, SUITE 200	1.3 STREET ADDRESS	2302 PARKLAKE DRIVE, SUITE 200
CITY-ST-ZIP	ATLANTA GA 30345-2907	1.4 CITY-ST-ZIP	ATLANTA, GA 30345-2907
TITLE	CT	2.1 TITLE	V
NAME	HEPPNER, JOHN B JR.	2.2 NAME	KITT, HERMAN
STREET ADDRESS	2302 PARKLAKE DRIVE, SUITE 200	2.3 STREET ADDRESS	2302 PARKLAKE DRIVE, SUITE 200
CITY-ST-ZIP	ATLANTA GA 30345-2907	2.4 CITY-ST-ZIP	ATLANTA, GA 30354-2907
TITLE	DS	3.1 TITLE	V
NAME	HERNANDEZ, JUAN	3.2 NAME	HARRIS, KEN
STREET ADDRESS	2302 PARKLAKE DRIVE, SUITE 200	3.3 STREET ADDRESS	14133 W. 72 TERRACE
CITY-ST-ZIP	ATLANTA GA 30345-2907	3.4 CITY-ST-ZIP	SHAWNEE, KS 66216
TITLE	DV	4.1 TITLE	
NAME	GATES, KURT	4.2 NAME	
STREET ADDRESS	102 WILMOT ROAD, SUITE 160	4.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD IL 60015-5106	4.4 CITY-ST-ZIP	
TITLE	CFO	5.1 TITLE	
NAME	FLYNN, LES	5.2 NAME	
STREET ADDRESS	2302 PARKLAND DR #200	5.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	KARG, CHRISTOPHER	6.2 NAME	
STREET ADDRESS	2302 PARKLAKE DR, SUITE 200	6.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA FL	6.4 CITY-ST-ZIP	

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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/99 770/602-7200

Date

Daytime Phone #

CR2E034 (1/98)