FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # G32453**

1. Corporation Name HULETT ENVIRONMENTAL SERVICES, INC.

Principal Place of Business

Mailing Address

D O DOV 10520

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90172 027 ***150.00

1004 1 00		9 (81) BIBIK 84811 (8)

1959 WEST NINTH STREET		RIVIERA BEACH FL 03404							
RIVIERA BEACH FL 33404		US			DO NO	DO NOT WRITE IN THIS SPACE			
-					3. Date Incorporated or Q	ualifed			
					04/11/1983				
2. Principal Place of Business		2a. Mailing Address		4. FEI Number			plied For		
21		26		59-2282352	59-2282352 Not		t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75	Additional	
22		27		5. Certificate of Status De	sired []	Fee Re	quired		
City & State		City & State				ancing _	\$5.00	May Be	
23		28		Trust Fund Contribution	- 11	Added			
Zip Country					8. This corporation owes the current year Intangible				
24	25	Zip Country 29 33419-0529 30		Personal Property Tax.					
,	9. Name and Address of Current					10. Name and Address of New Registered Agent			
			_	81 Name	turel, Horvath +]	Y: 0.4			
	ETT, TIMITHY M				turel, Horvath + Inddress (P.O. Box Number is Not.)				
	BLOOMETELD DRIVE			82			ail_	_1	
WES	FPALM BEAGHLFL 33405			83					
					<u> </u>		100 7:- (5-4-	
				84 City	alm Beach Garder	عد FL	85 Zip 9	Code 34/D	
11 Pursuant	to the provisions of Sections 697 0502	and/607.15@8. Florida Statutes.	the a	named o	ornoration submits this statement	for the numose of	changing its	registered	
office dr n	egistered agent) or both, in the state of m familiar with, and accept me obligati	Florida, Sugh change was auth	orized	by the corpo	ration's board of directors. I hereb	y accept the appo	intment as re	gistered	
agent. I a	m tanintar with and accept nevoligati	ions or, Section 607.0505, Florida	a Stati	nes.		7/2/	199	}	
SIGNATURE	Signature typed or printed name of registered agent		raistered	Agent signature re	quired when reinstating)	DATE	1/		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES	TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	PD /	☐ DELETE	1.1 TI	LE I			Change	Addition	
NAME	HULETT, TIMOTHY M.		1.2 NA	ME	•				
STREET ADDRESS	108 BLOOMFIELD DRIVE		1.3 \$1	REET ADORESS				ļ	
CITY-\$T-ZIP	WEST PALM BEACH FL			Y-ST-ZIP				}	
TITLE	ST	DELETE	2.1 TI				Change	☐ Addition	
NAME	HULETT, ELIZABETH B		2.2 NA	ME				1	
STREET ADDRESS	108 BLOOMFIELD DRIVE		1	REET ADDRESS					
1	WEST PALM BEACH FL			TY-ST-ZIP				-	
CITY-ST-ZIP	WEGITADII BEAGITTE	DELETE	3.1 11				Change	Addition	
]		<u></u>	3.2 N/	1	•		_		
NAME				REET ADDRESS	•			ſ	
STREET ADDRESS									
CITY-ST-ZIP		☐ DELETE	4.1 Tr	TY-ST-ZIP	·	<u> </u>	[] Change	☐ Addition	
. 1			4, 2 N				_ •	_	
NAME STORES ADDRESS				REET ADDRESS					
STREET ADDRESS			•						
CITY-ST-ZIP		□ DELETE	5.1 TI	Y-ST-ZIP			Change	Addition	
TITLE			5.1 NA	- 1	•				
NAME				REET ADDRESS				•]	
STREET ADDRESS				Y-ST-ZIP				· [
CITY-ST-ZIP		□ DELETE	6.1 TI				Change	Addition	
TITLE		□ becele	6.2 NA				,	, ,	
NAME		•	-	REET ADORESS			•	. (
STREET ADDRESS									
CITY-ST-ZIP			6.4 Cf	Y-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:

(561)844-8444

CR2E034 (11/98)