

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90414 007 ***150.00

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03082005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000081789 1. Entity Name ER ENVIRONMENTAL GROUP, INC.																																																																																																																							
Principal Place of Business 9487 SW 76TH ST APT M-3 MIAMI, FL 33173			Mailing Address 9487 SW 76TH ST APT M-3 MIAMI, FL 33173																																																																																																																				
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																				
City & State			City & State																																																																																																																				
Zip		Country		4. FEI Number 20-1197440 Applied For Not Applicable																																																																																																																			
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required																																																																																																																							
6. Name and Address of Current Registered Agent CORPDIRECT AGENTS, INC. 103 N MERIDIAN ST LOWER LEVEL TALLAHASSEE, FL 32301				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City FL Zip Code _____																																																																																																																			
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 familiar with, and accept the obligations of registered agent.																																																																																																																							
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																																																																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees																																																																																																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;">NAME</td> <td style="width: 10%; padding: 2px; text-align: right;">☐ Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;">NAME</td> <td style="width: 10%; padding: 2px; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="5" style="padding: 2px;">Erik Rosenstein</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td colspan="5" style="padding: 2px;">9487 SW 76 St Suite M3 Miami, FL 33173</td> </tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Delete</td><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Delete</td><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Delete</td><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Delete</td><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Delete</td><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">NAME</td><td style="padding: 2px; text-align: right;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td colspan="5" style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td colspan="5" style="padding: 2px;"></td></tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	Erik Rosenstein					CITY-ST-ZIP	9487 SW 76 St Suite M3 Miami, FL 33173					TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS						CITY-ST-ZIP						TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS						CITY-ST-ZIP						TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS						CITY-ST-ZIP						TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS						CITY-ST-ZIP						TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS						CITY-ST-ZIP					
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12. 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 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 trustee 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 attachment with an address, with all other like empowered.																																																																																																																							
SIGNATURE: 05-20-2005 736-271-4930 Date Daytime Phone if																																																																																																																							
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