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

Mailing Address

665 SE 10TH ST

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # V41297 1. Corporation Name

Principal Place of Business

665 SE 10TH ST

STE 202

ATLANTIS ENVIRONMENTAL ENGINEERING, INC.

| Deerfield bea  | NCH FL 33441   | DEERFIELD BEACH FL 33441 |  |  |                | DO NOT WRITE IN THIS SPACE   |  |  |
|--|--|--------------------------|--|--|----------------|--|--|--|
| US SERVICES DESCRIPTE SOFTY  |  | US                       |  |  |                | 3. Date Incorporated or Qualifed   |  |  |
| 00   | •  | Ç                        | n.   |  |                |  |  |  |
|  |  |                          |  |  |                | 06/04/1992   |  |  |
| 2. Principal Pi  | ace of Business  | 2a.                      | Mailing Address  |  |                | 4. FEI Number Applied For  |  |  |
| -  |  |                          | 26   |  |                | 65-0344946 Not Applicable  |  |  |
| 21 Chiltre And the oto   |  |                          | 1.75   |  |                | \$8.75 Additional  |  |  |
| Suite, Apt. #, etc.  |  |                          | Suite, Apt. #, etc.  |  |                |  |  |  |
| 22   |  |                          | 27   |  |                | Fee Required   |  |  |
| City & State   |  |                          | City & State   |  |                | 6. Election Campaign Financing S5.00 May Be  |  |  |
| ¬ . *  | -  | -                        |  |  |                | Trust Fund Contribution Added to Fees  |  |  |
| 23   |  | 28                       |  |  |                |  |  |  |
| Žip  | Country  |                          | Zip  | _ Country  |                | This corporation owes the current year Intangible  |  |  |
| 24   | 25   | 29                       | 30   | 0  |                | Personal Property Tax.   |  |  |
|  |  |                          |  |  |                | 10. Name and Address of New Registered Agent   |  |  |
| 9. Name and Address of Current Registered Agent  |  |                          |  |  |                |  |  |  |
| A STATE OF THE STA |  |                          |  | [81]   | 81 Name        |  |  |  |
| CAPELLINI, ALBERT.R  |  |                          |  | OO Characterist (D.O. Davidiumbas in Mark Association) |                |  |  |  |
| AND 665 SE 10TH ST   |  |                          |  | 82 Street Address (P.O. Box Number is Not Acceptable)  |                |  |  |  |
|  |  |                          |  |  |                | The second secon |  |  |
| STE 202  |  |                          |  | 83   |                | 1962年的高級。1962年1962年1963年1963年1963年1963年1963年1963年1963年1963   |  |  |
| DEERFIELD BEACH FL 33441   |  |                          |  |  |                | 。2015年,這個問題自身認為相談的問題的認識。   |  |  |
| DEL  |  |                          |  | 84   | City           | 85 Zip Code  |  |  |
|  |  |                          |  |  | •              | FL 10 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  |  |  |
| 11 Pursuant t  | to the provisions of Sections 607 0502   | and 6                    | 07.1508, Florida Statutes  | , the above  | -named o       | ed corporation submits this statement for the purpose of changing its registered   |  |  |
| Office or re   | egistered agent or both in the State o   | f Floric                 | ta. Such change was auth   | norized by   | the corpo      | rporation's board of directors. I hereby accept the appointment as registered  |  |  |
| agent. I ai  | m familiar with, and accept the obligat  | ons of                   | Section 607.0505, Florid   | la Statutes.   |                |  |  |  |
| .1   | •  | į, s                     |  |  |                |  |  |  |
| SIGNATURE  | Signature, typed or printed name of registered agent   | and title                | if annicable (NOTE: D  | egistered Agen   | t signature re | ne required when reinstating) DATE   |  |  |
|  |  |                          |  |  | g              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |  |  |
| 12.  | OFFICERS ANI   | אוט ל                    | - aurvi  | 13.  | . 1            | Change Addition  |  |  |
| TITLE ]  | D  |                          | DELETE   | 1.1 TITLE  |                | ☐ Change ☐ Addition  |  |  |
| NAME   | CAPELLINI, ALBERT R.   |                          |  | 1.2 NAME   | - 1            | A CONTRACTOR OF THE CONTRACTOR |  |  |
| }  |  |                          |  | 1  |                |  |  |  |
| STREET ADDRESS   | 1000 SE 15 AVE   |                          |  | 1.3 STREET   | ADDRESS        | SS   |  |  |
| CITY-ST-ZIP  | DEERFIELD BEACH FL   |                          |  | 1.4 CITY-ST  | -ZIP           |  |  |  |
| TITLE  |  |                          | ☐ DELETE   | 2.1 TITLE  | 1              | ☐ Change ☐ Addition  |  |  |
| IIILE  |  |                          |  |  |                |  |  |  |
| NAME   |  |                          |  | 2.2 NAME   |                |  |  |  |
| STREET ADDRESS   | •  | •                        | •  | 2.3 STREET   | ADDRESS        | ss   |  |  |
|  |  |                          |  |  | ·              |  |  |  |
| CITY-ST-ZIP  | and the Page   |                          |  | 2. 4 CITY-S  | 1-ZIP          |  |  |  |
| TITLE  | lander of the second of the se |                          | ☐ DELETE   | 3.1 TITLE  |                | . Change Addition  |  |  |
| NAME A   | the first small of the contraction   | 77.00                    | Kit .  | 3.2 NAME   |                |  |  |  |
| 7.7  | Reference of the proper  | " E                      | Property of the Control of the Contr |  |                |  |  |  |
| STREET ADDRESS   |  |                          |  | 3.3 STREET   | ADDRESS        |  |  |  |
| CITY-ST-ZIP  | atterner<br>Janetreet  | •                        |  | 3.4. CITY- S   | T-ZIP          | · 一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、   |  |  |
| TITLE TREE   | 5 (105 L) 1 (2 L) 2 (10 L) 2 (10 L) 3 (10 L) 4 ( |                          | DELETE   | 4.1 TITLE  |                | Change 40 Addition   |  |  |
|  |  |                          |  |  |                |  |  |  |
| NAME   |  | 0                        | st 1 .   | 4.2 NAME   |                | ;  |  |  |
| STREET ADDRESS   | •  | 63<br>53                 |  | 4.3 STREET   | ADDRESS        | ss   |  |  |
| · ''' }  |  | 75                       |  | 1  |                | ,  |  |  |
|  | ~ 41 1   |                          |  | 4.4 CITY-S1  | i-2IP          |  |  |  |
| TITLE  |  |                          | ." DELETE  | 5.1 TITLE  |                | ☐ Change ☐ Addition  |  |  |
| NAME   | •  |                          |  | 5.2 NAME   |                | Same Sign  |  |  |
|  |  |                          |  | 5.3 STREET   | ADDDECC        |  |  |  |
| STREET ADDRESS   |  | 2                        | A Committee of the Comm | 3.3 STREET   | ADDITE 33      |  |  |  |
| CITY-ST-ZIP  | D  |                          |  | 5.4 CITY-ST  | r-ZIP          |  |  |  |
| TITLE  | Let M. M. Pro. Pro. Library 19   |                          | ☐ DELETE   | 6.1 TITLE  |                | Change Addition  |  |  |
|  | 1705 46 14 A F   |                          |  |  |                | Change C Addition  |  |  |
| NAME   |  |                          |  | 6.2 NAME   |                |  |  |  |
| STREET ADDRESS   | 500366 1 영화  |                          |  | 6.3 STREET   | ADDRESS        | SS   |  |  |
|  | 01.0 1.00 July   |                          | or Bulgary enter   | 6.4 CITY-ST  | r. 710         | The training of the second of  |  |  |
| CITY-ST-ZIP  | The second of the second   | * *                      | · · · · · · · · · · · · · · · · · · ·  |  |                | 1 1 0 0 0 00 00 00 00 00 00 00 00 00 00  |  |  |
| 14. I hereby o   | certify that the information supplied wit  | n this fi                | iling does not qualify for the   | ne exempti   | on stated      | ted 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   |  |                          |  |  |                |  |  |  |
| 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 open algorithment with an address, with all other like empowered.   |  |                          |  |  |                |  |  |  |
| D10CK 12 (   | or proce to it changes, or co-all attach   |                          | gradings, militali u   |  |                |  |  |  |

SIGNATURE:

**FILED** 

Jan 29, 1999 8:00am

**Secretary of State** 

01-29-1999 90017 032 \*\*\*158.75