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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 299430

(9)

ENVIRO ENTERPRISES, INC.

FILED Apr 04 1997 8:00am Secretary of State

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'		Mailing Address 4521 ST. AUGUSTINE ROAD P.O. BOX 5814 JACKSONVILLE FL 32207-7241			-				
						 Date Incorporated or Qualification 12/06/1965 		Pate of Last 1996	Report
2, Principal 21	Prace of Business	2a. Mailing Address				4. FEI Number 59-1478840			Applied For Not Applicable
Suite, Ap	ot. #, etc:	Suite, Apt #, etc.				Certificate of Status Desired		\$8.75	Additional Required
Oily & St	ale	City & Stato				Election Campaign Financin Trust Fund Contribution	9 🖂		May Be
Zφ	Country	7 ip	30 Co.	intry		This corporation has liability Florida Statutes		e tax under	
24	25 9. Name and Address of Curre	29 nt Registered Agent	[30]	T		10. Name and Address of New			
DA'	WKINS,CROSBY H			B1	Name				
452	21 ST. AUGUSTINE ROAD			82	Street Add	ress (P.O. Box Number is Not Acce	ptable)		
JA	CKSONVILLE FL 32203			83		<u> </u>	······		
				84	City		FL	85 Zip	Code
office of agent 1 Signature	ja perine ityje uti ir postied pame af rege tind ag	e of Florida, Such change wa gations of, Section 607,0505, ent and attribupplicable (N	s authorize Florida Sta OTE Registere	ed by itutes	the corporal	tion's board of directors. I hereby at red when relinstating)	DATE	pointment a	is registered
12.	A grant of the contract of the	ID DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECTO	
Title! NAM's	PD DAWKINS,CROSBY H	[DELGIE	1.1 TI 1.2 N					L Cuange	Audinon
STREET ADDRESS	ARAL OF ALIQUIATINE DOAD				ADDRESS				
CATY SI-73	JACKSONVILLE FL		1.4 C	ITY-S	T - 71P				
THEF	SV CATHADAG A	DELETE	2.1 7					Change	Addition
NAME STREET ADGRESS	DAWKINS, CATHARINE N 4521 ST AUGUSTINE ROAD		22 N		ADDRESS				
C 17 - 51 - 24	JACKSONVILLE, FL 00000				ST-ZIP				
Titt		☐ DELETE	3.1 T				25 57	Change	Addition
NAM-			3.2 N	IAME	ļ		,i,		
STREET ACCURATE	ń				ADDRESS				
Coly-St Zif		DELETE	3.4. (4.1 T		ST - ZIP			Change	Addition
NAMI		F3 54-F1F		NAME	1				
STREET ADDRESS	J5		- 1		ADDRESS				
CITY - ST. ZE				ITY - S	T-ZIP				
TITLE		☐ DELETE	5.1 T					Change	Addition
MW-			5.2 N		ADDOCES.				
STREET ADMINES					ADDRESS				
City St. 7iP		DELETE	6.1 T		T-ZIP			Change	Addition
NAME		Section 4	6.2 N						
STREET ADOREST	3,		6.3 S	TREET	ADDRESS				
O11y-51-75			6.4 C	IIY-S	1 - Z(P				

14. If do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armual 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.