2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004 8:00 am
Secretary of State
07-08-2004 90093 024 ***563.75

DOCUMENT # F01000003282

1. Entity Name
ENVIRONMENTAL ENGINEERING SERVICES, INCORPORATED

Principal Place of Business	Mailing Address
7431 PARK SPRINGS CIRCLE ORLANDO, FL 32835	7431 PARK SPRINGS CIRCLE ORLANDO, FL 32835

06302004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
9525 Castleford Point	9525 Castleford Point
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando, FL 32836	City & State: Orlando, FL 32836
Zip: 32836 Country: Orange	Zip: 32836 Country: Orange

4. FEI Number: 06-1344943 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANCOCK, JOHN C
7431 PARK SPRINGS CIRCLE
ORLANDO, FL 32835
(Address Change Only)

7. Name and Address of New Registered Agent

Name: SAME
Street Address (P.O. Box Number is Not Acceptable): 9525 Castleford Point
City: Orlando FL Zip Code: 32836

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: [signature] 7/2/4
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☒ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HANCOCK, JOHN C 7431 PARK SPRINGS CIRCLE ORLANDO, FL 32835	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME 9525 Castleford Point (Address Only) Orlando, FL 32836	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HANCOCK, NANCY J 7431 PARK SPRINGS CIRCLE ORLANDO, FL 32835	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same (Address Only) 9525 Castleford Point ~~Orlando, FL 32836~~	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] 7/2/4
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #