

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003035

FILED
Jan 14, 2009
Secretary of State

Entity Name: ENVIRONMENTAL TEMPORARY SERVICES INCORPORATED

Current Principal Place of Business:

1765 OLD GLORY BLVD.
VIERA, FL 32940 US

New Principal Place of Business:

4224 FENROSE CIRCLE
MELBOURNE, FL 32940 US

Current Mailing Address:

1025 ROCKLEDGE DR.
A-113
ROCKLEDGE, FL 32955 US

New Mailing Address:

1025 ROCKLEDGE DR.
#104
ROCKLEDGE, FL 32955 US

FEI Number: 16-1449632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZAJAC, JACQUELYN L
1025 ROCKLEDGE DRIVE
A-113
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

ZAJAC, JACQUELYN L
1025 ROCKLEDGE DRIVE
#104
ROCKLEDGE, FL 32955 US

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.

SIGNATURE:

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: ZAJAC, JACQUELYN L
Address: 1025 ROCKLEDGE DR., A-113
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: DVS () Delete
Name: ZAJAC, WILLIAM V JR
Address: 1025 ROCKLEDGE DR., A-113
City-St-Zip: ROCKLEDGE, FL 32955 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: ZAJAC, JACQUELYN L
Address: 1025 ROCKLEDGE DR., #104
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: DVS (X) Change () Addition
Name: ZAJAC, WILLIAM V JR
Address: 1025 ROCKLEDGE DR., #104
City-St-Zip: ROCKLEDGE, FL 32955 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELYN L ZAJAC

DPT

01/14/2009

Electronic Signature of Signing Officer or Director

Date