

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002790

Entity Name: ENVIRO-SYSTEMS CONTROL, INC.

FILED
Feb 08, 2007
Secretary of State

Current Principal Place of Business:

4B-B BOVONI
ST. THOMAS, VI 00802

New Principal Place of Business:

18-8 SMITH BAY
3RD FLOOR
ST. THOMAS, VI 00802

Current Mailing Address:

6501 RED HOOK PLAZA, SUITE 201
PMB 554
ST. THOMAS, VI, 00802

New Mailing Address:

6501 RED HOOK PLAZA, SUITE 201
PMB 554
ST. THOMAS, VI 00802

FEI Number: 59-1958825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RYAN, THOMAS D III
241 LAKE ASBURY DRIVE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPT () Delete
Name: RYAN, THOMAS D III
Address: 6501 RED HOOK PLAZA, SUITE 201, PMB 554
City-St-Zip: ST. THOMAS, VI 00802

Title: VCS () Delete
Name: RYAN, NANCY J
Address: 6501 RED HOOK PLAZA, SUITE 201, PMB 554
City-St-Zip: ST. THOMAS, VI 00802

Title: D () Delete
Name: RYAN, JESSE T
Address: 6501 RED HOOK PLAZA, SUITE 201, PMB 554
City-St-Zip: ST. THOMAS, VI 00802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS D. RYAN, 111

CPT

02/08/2007

Electronic Signature of Signing Officer or Director

Date