

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 22, 2006 8:00 am
Secretary of State

08-22-2006 90029 038 ***150.00

DOCUMENT # F05000004560

1. Entity Name
PINE ENVIRONMENTAL SERVICES, INC.



Principal Place of Business
**C/O RAF INDUSTRIES, INC.
165 TOWNSHIP LINE RD., STE. 2011
JENKINTOWN, PA 19046**

Mailing Address
**C/O RAF INDUSTRIES, INC.
165 TOWNSHIP LINE RD., STE. 2011
JENKINTOWN, PA 19046**

50025913



2. Principal Place of Business
92 N. Main Street

3. Mailing Address
92 N. Main Street

Suite, Apt. #, etc.
Bldg. 20

Suite, Apt. #, etc.
Bldg. 20

08092006 Chg-P CR2E034 (11/05)

City & State
Windsor NJ

City & State
Windsor NJ

4. FEI Number
26-0116297

Applied For
Not Applicable

Zip Country
08561 USA

Zip Country
08561 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEES \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **PINHEIRO, ROGERIO**
STREET ADDRESS **25 GRAVATT CIRCLE**
CITY-ST-ZIP **CLARKSBURG, NJ 08510**

TITLE **President** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **COO** ☐ Delete
NAME **PINHEIRO, ANGELO**
STREET ADDRESS **26 CRANBURY BROOK DRIVE**
CITY-ST-ZIP **ENGLISHTOWN, NJ 07726**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPS** ☐ Delete
NAME **RAF INDUSTRIES, INC.**
STREET ADDRESS **165 TOWNSHIP LINE ROAD, STE. 2011**
CITY-ST-ZIP **JENKINTOWN, PA 19046**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **HAMPSON, WILLIAM O**
STREET ADDRESS **165 TOWNSHIP LINE ROAD, STE. 2011**
CITY-ST-ZIP **JENKINTOWN, PA 19046**

TITLE **Chief Financial Officer** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **AS** ☐ Delete
NAME **FOX, AMY**
STREET ADDRESS **165 TOWNSHIP LINE ROAD, STE. 2011**
CITY-ST-ZIP **JENKINTOWN, PA 19046**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: x

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/9/06

Date

609-371-9663

Daytime Phone *