ANNU	PROFIT PORATION IAL REPORT 1996	FLORIDA DE Sanc	I IS \$225.00 EPARTMENT OF STATI: dra B. Mortham cretary of State OF CORPORATIONS	
DOCUN 1. Corporation ENVIR	MENT # F92000 Nome ONMENTAL RESTORATION	0000686 ( company	(7)	
Principal Place d		Mailing Address		
9700 ASHLEY FREDERICKS	Y DAWN CT BURG VA 22408	9700 ASHLEY DAW FREDERICKSBURG		3. Date Incorporated or Qualified 3a. Date of Last Report
2. Principal Plac	ce of Business	2a. Mailing Address		12/14/1992         03/07/1995           4. FEI Number         Applied For
21] Suite, Apt. #,		26 Suite, Apt #, etc.		54-1514399 Not Applicable
22	, e.c.	27		5. Certificate of Status Desired Status Desired Status Desired Fee Required
City & Stale		City & State 28		6. Election Campaign Financing Trust Fund Contribution
* Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No
· · · · · · ·	9. Name and Address of Current		30 81 Name	10. Name and Address of New Registered Agent
900 UNI JACKSO	CARLTON J IVERSITY BLVD DNVILLE FL 32211	and 607.1508, Florida Stal	83 84 City	FL       85       Zip Code         ration submits this statement for the purpose of changing its registered office
U registeret	d agent, or both, in the State of Florida 1, and accept the obligations of, Section	a. Such change was autho	vized by the comparation is new	and and advantages of the second s
SIGNATURE	il pu time typed or printed name of registering agentian	n 607.0505, Fionda Statut	(NOTE: Registered Agent signature required	rd of directors. I hereby accept the appointment as registered agent. I am
SIGNATUR	iljustere tylkefor prided nan e of registered agenciae OFFICERS AND I	n 607.0505, Fionda Statut	tes.	
SIGNATURE 12. 11'U NAM	April time typed or printe there of negotive it agric an OFFICE RS AND 1 CVCD LITTEK, ALBERT G	o treit applicable ( DIRE CTORS	tos. (NOTE: Registerod Agont signature required 13. 1 1 TILE 1.2 NAME	d when reinslating: DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
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