FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

F93000001126 (2)

CUSTOM ENVIRONMENT, INC.

Principal Place of Business Mailing Address						- I IODIIOD NIKE IDIAD IIIII ADAK EDRA	oo nii oonii oolei ii		(I HERE AND REI	
	1499 SW 30TH AVE	1499 SW 30TH AVE								
	#29	#29								
	BOYNTON BCH FL 33426 US	BOYNTON BCH FL 33 US	BOYNTON BCH FL 33426 US			3. Date Incorporated or Qualified 3a. Date of L 03/02/1993 05/0			Last Report 1/1995	
2.	Principal Place of Business	2a. Mailing Address				4. FEI Number	1	****	Applied For	
21	l	26				65-0377401		П	Not Applicable	
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	7			5. Certificate of Status Desired	5. Certificate of Status Desired Serviced Fee Required			
	City & State	├── ┐				6. Election Campaign Financing \$5.00 May Be			O May Be	
23		28	Т.	Country		Trust Fund Contribution			d to Fees	
24	Zip Country	- '		Country		8. This corporation has liability for in Florida Statutes Yes		der s	199.032,	
24	25 9. Name and Address of Cur	29 rent Registered Agent	30]	T		10. Name and Address of New Ri		1		
ļ ļ		on tiogistion rigon		81	Name	IO. Hallo and realists of Herr III	Mercies vide	<u></u>		
	KNELSON, GARY									
	2818 CAMBRIDGE RD			82	Street Addr	treet Address (P.O. Box Number is Not Acceptable)				
	LANTANA FL 33462			83						
				84	City		 85	Z	p Code	
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1	 Pursuant to the provisions of Sections 607.0s or registered agent, or both, in the State of F 	orida. Such change was authoriz	ed by th	ibove-r ie corp	named corpor oration's boar	ation submits this statement for the purp rd of directors. Thereby accept the appo	oose of changin intment as regis	gutsu sterec	registered office I agent. I am	
	familiar with, and accept the obligations of, S	ection 607.0505, Florida Statutes	S			, , ,	Ü		J	
S	PGNATURE. Signature typed or printed name of registered a				t signature required					
1:		AND DIRECTORS	ne Regisse		t signature required	ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIR	FCTC	DRS IN 12	
	DCP	DELETE		1 TITLE		ADDITIONAL OF THE OFFI			Addition	
N/	AME KNELSON, GARY			2 NAME				•		
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CI	ITY-ST-ZIP LANTANA FL		1.4							
	TLF	□ DELETE				· · · · · · · · · · · · · · · · · · ·		ange	Addition	
N/	SME		2 3	2 2 NAME						
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	IREEL ADDRESS				ADDRESS					
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	REEL ADDRESS		. I		ADDRESS					
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[[] - -	1Y-S1-Ziff	of with this flips is ush stails for	64 100 and 24	4 CITY - S	1-ZIP	or the examplion stated in Postion 110.5	700AA Florida	Ctestes	ton 14 milion	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if played, or on an attriction and address.

SIGNATURE:

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR HOLESON 3 9 96 (407) 735-0202

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