FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 25 AM 7:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000006628 (1)**

1. Corporation Name

OMEGA ENVIRONMENTAL, INC.

Principal Place of Business	Mailing Address
P.O. BOX 3055 BOTHELL WA 98041-3055	P.O. BOX 3055 BOTHELL WA 98041-3055

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/28/1994 | 3a. Date of Last Report:

2. Principal Place of Business
21: PO Box 3005
22: Suite, Apt. #, etc.
23: City & State
24: Zip 98041-3005 | 25: Country

2a. Mailing Address
26: PO Box 3005
27: Suite, Apt. #, etc.
28: City & State: Bothell WA
29: Zip 98041-3005 | 30: Country

4. FEI Number: ~~99-1499751~~ 91-1499751 | Applied For | Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HIQ CORPORATE SERVICES, INC.
526 E. PARK AVENUE, STE 200
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** | 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE	CD	11 TITLE	D ☐ Change ☒ Addition
NAME	AZURE JR., LEO L	12 NAME	MARK DUNAWAY
STREET ADDRESS	19805 NORTH CREEK PKWY	13 STREET ADDRESS	5801 GOSHEN SPRINGS RD, SUITE D
CITY ST ZIP	BOTHELL WA	14 CITY ST ZIP	NORCROSS GA 30071
TITLE	CFO	21 TITLE	D ☐ Change ☒ Addition
NAME	STEIGERWALD, DAN E	22 NAME	STEVE SARICH JR
STREET ADDRESS	19805 NORTH CREEK PKWY	23 STREET ADDRESS	605 MADISON ST., SUITE 220
CITY ST ZIP	BOTHELL WA	24 CITY ST ZIP	SEATTLE WA 98104
TITLE	S	31 TITLE	D ☐ Change ☒ Addition
NAME	DECKER, SONJA G	32 NAME	ED O'SULLIVAN
STREET ADDRESS	19805 NORTH CREEK PKWY	33 STREET ADDRESS	2601 W MARINA PLACE, SUITE P
CITY ST ZIP	BOTHELL WA	34 CITY ST ZIP	SEATTLE, WA 98199
TITLE	PD	41 TITLE	☐ Change ☐ Addition
NAME	KRAVITZ, DAVID C	42 NAME	
STREET ADDRESS	19805 NORTH CREEK PKWY	43 STREET ADDRESS	
CITY ST ZIP	BOTHELL WA	44 CITY ST ZIP	
TITLE	V	51 TITLE	☐ Change ☐ Addition
NAME	BLACKSTONE, GEORGE H	52 NAME	
STREET ADDRESS	19805 NORTH CREEK PKWY	53 STREET ADDRESS	
CITY ST ZIP	BOTHELL WA	54 CITY ST ZIP	
TITLE	AS	61 TITLE	☐ Change ☐ Addition
NAME	POWELL, BRADLEY S	62 NAME	
STREET ADDRESS	19805 NORTH CREEK PKWY	63 STREET ADDRESS	
CITY ST ZIP	BOTHELL WA	64 CITY ST ZIP	

14. 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)(i), 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 changed, or on an attachment with an address.

SIGNATURE: Leigh D. Parker 2/21/95 (206) 486-4800
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

0004723 FN