


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 21, 1999 8:00 am  
Secretary of State

02-21-1999 90038 016 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000006637					
1. Corporation Name ENVIROTECH PUMPSYSTEMS, INC.					
Principal Place of Business 440 WEST 800 SOUTH SALT LAKE CITY UT 84101 US			Mailing Address 440 WEST 800 SOUTH SALT LAKE CITY UT 84101 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/28/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 87-0529231	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
12. OFFICERS AND DIRECTORS					
TITLE	PD	<input type="checkbox"/> DELETE			
NAME	DAVID DUNBAR				
STREET ADDRESS	149 NEWLANDS RD.				
CITY-ST-ZIP	CATHCART GL				
TITLE	VSD	<input type="checkbox"/> DELETE			
NAME	NELSON, REED				
STREET ADDRESS	440 W. 800 SOUTH				
CITY-ST-ZIP	SALT LAKE CITY UT 84101				
TITLE	VD	<input type="checkbox"/> DELETE			
NAME	KRUMM, PETER				
STREET ADDRESS	440 W. 800 SOUTH				
CITY-ST-ZIP	SALT LAKE CITY UT 84101				
TITLE	MARC WHITE	<input type="checkbox"/> DELETE			
NAME	MARC WHITE				
STREET ADDRESS	440 W. 800 SOUTH				
CITY-ST-ZIP	SALT LAKE CITY UT 84101				
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME		DENNIS CARTER			
4.3 STREET ADDRESS		440 W. 800 SOUTH			
4.4 CITY-ST-ZIP		SALT LAKE CITY UT 84101			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					



DO NOT WRITE IN THIS SPACE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)