


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # F94000006637	
1. Entity 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
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DO NOT WRITE IN THIS SPACE



01222004 No Chg-P CR2E034 (10/03)

4. FEI Number 87-0529231	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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

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IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000030934 02/04/04-80128-018 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROARK, JOSEPH 440 W 300 SOUTH SALT LAKE CITY, UT 84101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARLOR, R. LYNN 440 W 300 SOUTH SALT LAKE CITY, UT 84101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS CARDER, DENNIS 440 W. 800 SOUTH SALT LAKE CITY, UT 84101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BEAL, LINDA 440 WEST 800 SOUTH SALT LAKE CITY, UT 84101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplementary 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	22 JAN 2004 <small>Date</small>	801-530-7528 <small>Daytime Phone #</small>
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