## 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

DOCUN 1. Corporation	MENT #	F950000	01465 (2	!)						
	IT ENVIROSOLU	JTIONS, INC.	-							10 E110
Principal Place of Business Mailing Address							-{	I <b>UQ</b> 163 <b>UU</b> 641 <b>UU</b> 1		IN MAINT BEAL ANDI
10201 WAYZATA BLVD. STE. 100 MINNEAPOLIS MN 55305-1500			10201 WAYZATA BLVD. STE. 100 MINNEAPOLIS MN 55305-1500							
							3. Date Incorporated or Qualified 03/27/1995	3a. Date	of Last Re	port
2. Principal Pla	oe of Business	. Mailing Address				4. Fill Number	I,		Applied For	
21						41-1667349			Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & State		27	City & State				6. Election Campaign Financing			D May Be
23		[28]	· <del></del>				Trust Fund Contribution  8. This corporation has liability for its component of the second contribution.			to Fees
Ζιρ <b>24</b>	Country 25		Zip C 29 30		Country			ntangioie tax □ No	Uniders	199.032,
	9. Name and Add	stered Agent				10. Name and Address of New R	egistered A	gent		
					81	Name				
	RPORATION SYSTI		Ī	82	Street Addre	Address (P.O. Box Number is Not Acceptable)				
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				}	83	· · · · · · · · · · · · · · · · · · ·				
				ļ	-				Se Zin Codo	
				1	84	City	FL 85 Zip Code			
11. Pursuant to	the provisions of Ser	ctions 607.0502 and 60	07.1508, Florida Statute	es, the aboved by the c	ve-n	amed corpora	ition submits this statement for the pur d of directors. I hereby accept the app	pose of char	nging its re	egistered office agent. I am
familiar with	n, and accept the obli	gations of, Section 607	.0505, Florida Statutes		<b>p</b> .		or direction in manage and approved approved		-3	
SIGNATURE	Stonet an aread or pointed per	ne of registered agent and title i	f anolicable (NC	TF Registered	Agent	t signature required	when rem: taling)	DATE		
12.	SCHOOL STANCE OF THE SE	OFFICERS AND DIRE		13.	•		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
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CITY-ST-ZIP						ST - ZIP				
14. I do hereb	y certify that the infor	nation supplied with th	is filing is voluntarily fur	nished and	doe	s not qualify fo	or the exemption stated in Section 119	.07(3)(k), Flo	rida Statu	tes. I further

certify that the information indicated on this annual report is 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 an antecomment with an address.

SIGNATURE: SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR