


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

FILED  
May 06 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>F95000003102</b>			
1. Corporation Name <b>BONANO ENVIRONMENTAL TECHNICAL ASSOCIATES, INC.</b>			
Principal Place of Business <b>4165 Mockingbird Dr. Melbourne, FL 32934</b>		Mailing Address <b>4165 Mockingbird Dr. Melbourne, FL 32934</b>	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 South Pine Island Road Plantation, FL 33324		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: <i>Evaristo J. Bonano</i> DATE: <i>4/29/97</i>			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE NAME STREET ADDRESS CITY, ST, ZIP 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
PCTD BONANO, EVARISTO J. 6613 ESTHER NE ALBUQUERQUE, NM 87109		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	
S BONANO, NILSA E. 6613 ESTHER NE ALBUQUERQUE, NM 87109		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
V GABALDON, DANIEL S. 5008 CORDONIZ NW ALBUQUERQUE, NM 87120		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
		600002181346 -05/16/97--01046--049 ***165.00	
14. I do hereby certify that the information supplied with this filing 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 of this report, or on an attachment with an address.			
SIGNATURE: <i>Evaristo J. Bonano</i>		Date: 4/29/97 Daytime Phone #: (505) 822-1968	

CR2E034 (9/96)