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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE .

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600000151

## **FILED** Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90015 044 \*\*\*150.00

SOUTHE	rn environmental ASSO	CIATES INC.					
Principal Plac	e of Business	Mailing Address		<del>-</del>	1 1005100 (158 )0110 01115 03(1) 80(1) 8	BOARA OOKAA OOJAA OOKAA H	
•		111 MOCKINGBIRD LANE					-
111 MOCKINGBIRD LANE MARATHON FL 33050 MARATHON FL 33050 MARATHON FL 33050							
manufaction 1 E					DO NOT WRITE	IN THIS SPACE	
					3. Date Incorporated or Qualifed 01/09/1996		1
2 Principal P	lace of Business	2a. Mailing Address		<del></del>	4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For
-i	iace of Business	26			65-0566511	<del> </del> -	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.7	5 Additional
22	, , , ,	27			5. Certificate of Status Desired		Required
City & Stat	re	City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation owes the current	t vear Intangible	
24	25	<b>—</b>	30		Personal Property Tax.	☐Yes	□No
24]	9. Name and Address of Current				10. Name and Address of New Reg	gistered Agent	
			81	Name			
	SON, OSWALD JR.				(D.O. Ban Number in New Assessment	-1	
	MOCKINGBIRD LANE	* * * * * * * * * * * * * * * * * * *	82	Street Add	lress (P.O. Box Number is Not Acceptable	<del>9)</del> ,	
	ATHON FL 33050		83			图 第二次	great the
						<u> </u>	<u>ាំ មានដៅអាវ។</u>
			84	City		EI 85 Z	ip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above	e-named corp	poration submits this statement for the pu	rpose of changing	its registered
11. Pursuant office or agent. I a	to the provisions of Sections 607.0502 registered agent; or both, in the State our familiar with, and accept the obligation of the state of the stat	ons or, Section 607.0303, Fior	nua Statutes		poration submits this statement for the pu ion's board of directors. I hereby accept t ed when reinstating),	rpose of changing he appointment as	its registered registered
agent. I a	to the provisions of Sections 607.0502 registered agent; or both, in the State our familiar with, and accept the obligation of the state of the stat	and title if applicable. (NOTE:	nua Statutes			DATE	
agent. I a	Im familiar with, and accept the obligation of the state	and title if applicable. (NOTE:	: Registered Ager		ed when reinstating), P. 0	DATE	TORS IN 12
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE:	: Registered Ager		ed when reinstating),	DATE CERS AND DIREC	TORS IN 12
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered agent OFFICERS AND CP WILSON, OSWALD JR.	and title if applicable. (NOTE:	Registered Ager  13. 1.1 TITLE 1.2 NAME		ed when reinstating),	DATE CERS AND DIREC	TORS IN 12
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14. 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 if charges, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4 Jon 94 305 743-0038