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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G89448

1. Corporation	ECH, INC.	•					
	—						
Principal Place of Business Mailing Address				· · · · · · · · · · · · · · · · · · ·		BIBNI BIBNI BIBNI B	11811 81811 1881
1660 N.W. 65TH AVE P O BOX 15130							
STE. 4 PLANTATION FL 33313					Į.		
PLANTATION FL 33313 US					DO NOT WRITE IN THIS	S SPACE	
US	e.				3. Date Incorporated or Qualifed		
2 Principal D	Place of Business	2a. Mailing Address			02/29/1984 4. FEI Number		
2. FIIIICIPAI F	lace of Busiless	— -			65-0012352	 	plied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.				00-0012302	\$8.75	t Applicable	
22 27				5. Certifcate of Status Desired	Fee Re	1	
City & State City & State					6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution	Added to	
Zip	Country 25	Zip	Country 30	/	This corporation owes the current year In Personal Property Tax.	ntangible	□No
	9. Name and Address of Curren				10. Name and Address of New Registered		,
		,	81	Name			
	SE, A. P.		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	GRIFFIN ROAD		"	Olleet Add	ress (F.O. Box Number is Not Acceptable)		
DAV	1E FL 33314		83				7 (4.1)
	;		84	City		05 7:- (2040
San				City	FŁ	85 Zip C	2008
11. Pursuant office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.	2 and 607.1508, Florida Statutes of Florida. Such change was autions of Section 607.0505. Florida.	s, the abov thorized by	e-named corp the corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	f changing its sintment as req	registered gistered
SIGNATURE			00 0101010	•			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F	Registered Age	nt signature require	od when reinstating) - DATE		
12:		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PCD DELETE		1.1 TITLE			☐ Change	☐ Addition
NAME	SEBORN, EVANS W. JR.		1.2 NAME				
STREET ADDRESS	1		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	PLANTATION FL		1.4 CITY+ST+ZIP				
TITLE	VDS DELETE		2.1 TITLE		•	☐ Change	Addition
NAME	FRUITS, JOHN		2.2 NAME				
STREET ADDRESS			2.3 STREE	TADDRESS	•		
CITY-ST-ZIP	DAVIE, FLL	, Florette	2. 4 CITY-5	ST-ZIP			FT 4 4 PV
TITLE	& # F :	.* DELETE	3.1 TITLE			☐ Change	Addition
NAME -	Tree Selection		3.2 NAME				
STREET ADDRESS	\$ 12 2° 5 1			TADDRESS			-
CITY-ST-ZIP	:	□ DELETE	3.4. CITY-S	ST-ZIP		F7.05	TT A JURIA
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS	outs 8			TADDRESS			
CITY-ST-ZIP		Doriete	4.4 CITY-S	T-ZIP		[] Char	C Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME			☐ Change	☐ Addition
NAME	•		5.2 NAME 5.3 STREET	LADODESS			
STREET ADDRESS	EC3						
CITY-ST-ZIP	Market Art Control	☐ DELETE	5.4 CITY-ST 6.1 TITLE	1-ZIP			
TITLE	1117 200, 75	€ Dereie	6.2 NAME			☐ Change	☐ Addition
NAME STREET ADDRESS	Marine Control			ADDRESS			

6.4 CITY-ST-ZIP

14. I 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SICULATION REQUIRED TO STORING OFFICER OF DIRECTOR

01/05/99 (954) 584-0763

FILED

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90045 036 ***150.00

CR2E034 (11/98)