

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

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Apr 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J68569** (9)

1. Corporation Name
MAGNUM ENVIRONMENTAL SERVICES, INC.

Principal Place of Business
**1280 NE 48 STREET
POMPANO BEACH FL 33064**

Mailing Address
**1280 NE 48 STREET
POMPANO BEACH FL 33064-4909**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/17/1987	3a. Date of Last Report 06/20/1996
21	State, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2819155	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**DIMARIA, ALBERT
1280 N.E. 48TH STREET
POMPANO BEACH FL 33064**

10. Name and Address of New Registered Agent

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


Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

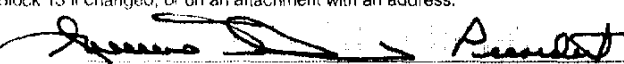
DATE

1/30/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	EXEC. VICE PRES
NAME	RAMOS, OSIRIS	1.2 NAME	DIRECTOR
STREET ADDRESS	5945 SE GENERAL LEE TERRACE	1.3 STREET ADDRESS	
CITY - ST - ZIP	STUART FL 34997	1.4 CITY - ST - ZIP	
TITLE	VSD	2.1 TITLE	CHAIRMAN - DIRECTOR
NAME	DIMARIA, ALBERT	2.2 NAME	
STREET ADDRESS	740 NE 28 AVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	POMPANO BCH FL	2.4 CITY - ST - ZIP	
TITLE	PTD	3.1 TITLE	
NAME	FREDERICO, JAMES	3.2 NAME	
STREET ADDRESS	3779 NW 52ND STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL 33496	3.4 CITY - ST - ZIP	
TITLE	AV	4.1 TITLE	VICE PRESIDENT
NAME	WILLIAMS, DENNIS	4.2 NAME	
STREET ADDRESS	6820 NW 75 CT.	4.3 STREET ADDRESS	
CITY - ST - ZIP	PARKLAND FL 33067	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	SECRETARY
NAME		5.2 NAME	GREGG WILKINSON
STREET ADDRESS		5.3 STREET ADDRESS	1280 NE 48th ST
CITY - ST - ZIP		5.4 CITY - ST - ZIP	POMPANO BCH FL 33064
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 if changed, or on an attachment with an address.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/97
Date

954-785-4320
Daytime Phone #

0148154

CR2E034 (9/96)