

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J68569

1. Entity Name

MAGNUM ENVIRONMENTAL SERVICES, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90011 032 ***158.75

Principal Place of Business

1280 NE 48 STREET
POMPANO BEACH FL 33064
US

Mailing Address

1280 NE 48 STREET
POMPANO BEACH FL 33064-4909
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2819155

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FREDERICO, JAMES
1280 N.E. 48TH STREET
POMPANO BEACH FL 33064

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	EVPD	<input type="checkbox"/> Delete
NAME	RAMOS, OSIRIS	
STREET ADDRESS	5945 SE GENERAL LEE TERRACE	
CITY-ST-ZIP	STUART FL 34997	
TITLE	CD	<input type="checkbox"/> Delete
NAME	DIMARIA, ALBERT	
STREET ADDRESS	1550 SE 11TH STREET	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	PTD	<input type="checkbox"/> Delete
NAME	FREDERICO, JAMES	
STREET ADDRESS	3779 NW 52ND STREET	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE	V	<input type="checkbox"/> Delete
NAME	WILLIAMS, DENNIS	
STREET ADDRESS	6820 NW 75 CT.	
CITY-ST-ZIP	PARKLAND FL 33027	
TITLE	S	<input type="checkbox"/> Delete
NAME	FULTON, PENNY	
STREET ADDRESS	1280 NE 48TH STREET	
CITY-ST-ZIP	POMPANO BCH FL 33064	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	EV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES FREDERICO

Date

4/6/00

Daytime Phone #

(954) 781-2320

CR2E034 (9/99)