FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 25 AM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J80446** **(4)**

1. Corporation Name
GREEN ENVIRONMENTS, INC.

Principal Place of Business	Mailing Address
390 SE 6 TERRACE POMPANO BEACH FL 33060	390 SE 6 TERRACE POMPANO BEACH FL 33060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/23/1987**
3a. Date of Last Report: **02/08/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: **59-2818397** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has subject to intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FAHMY, HANY
2213 E. ATLANTIC BLVD.
POMPANO BEACH FL 33062

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	D	☑ Change ☐ Addition
NAME	BILELLO, RICHARD	12 NAME	Bilello, Richard	
STREET ADDRESS	390 SE 6 TERRACE	13 STREET ADDRESS	390 S.E. 6 Terrace	
CITY ST ZIP	POMPANO BEACH FL	14 CITY ST ZIP	Pompano Beach, FL. 33060	
TITLE		21 TITLE	P/D/T	☐ Change ☑ Addition
NAME		22 NAME	Crespo, Lucy	
STREET ADDRESS		23 STREET ADDRESS	7376 N.W. 54 St.	
CITY ST ZIP		24 CITY ST ZIP	Lauderhill, FL. 33319	
TITLE		31 TITLE	M	☐ Change ☑ Addition
NAME		32 NAME	Juarez, Manuel	
STREET ADDRESS		33 STREET ADDRESS	531 S.W. 38 Terr.	
CITY ST ZIP		34 CITY ST ZIP	Ft. Laud., FL. 33312	
TITLE		41 TITLE	S	☐ Change ☑ Addition
NAME		42 NAME	Bilello, Lori	
STREET ADDRESS		43 STREET ADDRESS	390 SE 6 Terr.	
CITY ST ZIP		44 CITY ST ZIP	Pompano Bch, FL. 33060	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, added or deleted.

SIGNATURE: _____ 4-17-95 (305) 942-7008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0109971 CP