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FILED
Jun 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K60155 (4)
1. Corporation Name
ENVIRONMENTAL HEALTHCARE, INC.



Principal Place of Business
1122 E. ATLANTIC AVE.
SUITE A
DELRAY BEACH FL 33483
US

Mailing Address
1122 E. ATLANTIC AVE.
SUITE A
DELRAY BEACH FL 33483-6863
US

3. Date Incorporated or Qualified 01/23/1989
3a. Date of Last Report 02/27/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	65-0104203	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Zip	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	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

SCHMIDT, DAVID W.
100 N.E. FIFTH AVENUE
DELRAY BEACH FL

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	STENZ, FRANCINE P.	
STREET ADDRESS	938 SEAGATE DRIVE	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	DELETE
NAME	STENZ, BRIAN G.	
STREET ADDRESS	938 SEAGATE DRIVE	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	DELETE
NAME	STENZ, BRADLY J.	
STREET ADDRESS	4762 S LAKE DRIVE	
CITY-ST-ZIP	BOYNTON BCH FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME	355 Old School Rd	
1.3 STREET ADDRESS	Gulf Stream FL 33483	
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME	355 Old School Rd	
2.3 STREET ADDRESS	Gulf Stream, FL 33483	
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
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

6-16-97 561-265-0641

CR2E034 (9/96)