2000 UNIFORM BUSINESS REPORT (UBR)

Jan 28, 2000 8:00 am DOCUMENT # **K70574** 1. Entity Name **Secretary of State** GENESIS ENVIRONMENTAL SYSTEMS, INC. 01-28-2000 90095 046 ***150.00 Principal Place of Business Mailing Address 1101 \$ ROGERS CR. #16 1101 S ROGERS CR. #16 BOCA RATON, FL. 33487. C/O JAMES J BROWN **BOCA RATON FL 33487-2749** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0108046 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BROWN, JAMES J Street Address (P.O. Box Number is Not Acceptable) 1101 S. ROGERS CIR. #16 **BOCA RATON FL 33487** Zip Code City 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 (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing. \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PD TITLE Change ☐ Delete TITLE BROWN, JAMES J. NAME NAME STREET ADDRESS STREET ADDRESS 1101 S. ROGERS CR #16 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** Change ☐ Addition TITLE TITLE ☐ Delete BROWN, CRYSBEL J NAME NAME STREET ADDRESS STREET ADDRESS 1101 S. ROGERS CR #16 CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL 33487** ☐ Change ☐ Addition TITLE JRVP ☐ Delete TITLE BROWN, ERIC D NAME NAME STREET ADDRESS STREET ADDRESS 1101 S. ROGERS CR #16 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** Addition ☐ Defete Change TIT! F NAME BROWN, ANN M NAME STREET ADDRESS STREET ADDRESS 1101 S. ROGERS CR #16 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** ☐ Delete ☐ Change ■ Addition DITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 0.11 - ST-76 - Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 receive/for 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED