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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K

## **FILED** May 06 1997 8:00am Secretary of State

Corporation Nam	N # IN/400/	(U
<b>GREENBERG</b>	ENVIRONMENTAL, INC.	

Principal Place of Business Mailing Address		
9960 CYPRESS LAKE DR. 9960 CYPRESS LAKE DR. FT. MYERS FL 33919-6020		
03/28	ncorporated or Qualified 3a. Date of Last Report 05/01/1996	
2. Principal Place of Business 2a. Mailing Address 4. FEI Nu	mber Applied For	
	113787 Not Applicable	
27 5. Certific	sate of Status Desired S8.75 Additional Fee Required	
I1	on Campaign Financing \$5.00 May Bo Eurold Contribution Added to Fees	
Zip Country Zip Country 8. This co	orporation has liability for intangible tax under s. 199.032, Statutes 😾 Yes 🗌 No	
	and Address of New Registered Agent	
GREENBERG, JANET B 81 Name	-	
9960 CYPRESS LAKE DRIVE 82 Street Address (P.O. Box	Number is Not Acceptable)	
FT. MYERS FL 33919	- Tarres & Total Cooperation	
<b>84</b> City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	its this statement for the purpose of changing its registered directors. I hereby accept the appointment as registered	
SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable. (NOTI. Registereo Agent's grature required when reinstating		
12. OFFICERS AND DIRECTORS 13. ADDITION THE TS DELETE 1.1 THE	DNS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME GREENBERG, JANET B 1.2 NAME	L_J Change [_] Addilion	
STREET ADDRESS 9980 CYPRESS LAKE DR. 1.3 STREET ADDRESS		
CITY-ST-ZIP FT. MYERS FL 1.4 CITY-S1-ZIP	ļ	
TITLE P DELETE 21TILE	Change Addition	
NAME GREENBERG, HENRY N 2.2 NAME		
STREET ADDRESS 9960 CYPRESS LAKE DR. 23 STREET ADDRESS		
CITY-ST-ZIP FT. MYERS FL 2.4 CITY-ST-ZIP		
TITLE DELETE 3.1 TITLE	Change Addition	
NAME 3.7 NAME		
STREET ADDRESS 3.3 STREET ADDRESS		
CITY-ST-ZIP 3.4. CITY-ST-ZIP		
TITLE DELETE 41 TIBLE	Change Addition	
NAME 4 2 NAME		
STREET ADDRESS 4.3 STHEFT ADDRESS		
CFTY-ST-ZIP		
NAME L_ DELETE 5.1 TITLE	☐ Change ☐ Addition	
CITY-ST-ZIP	Change Addition	
NAME 62 NAME	C Stongs E Rudillon	
STREET ADDRESS 6.3 STREET ADDRESS		
CITY-ST-ZIP 6.4 CITY-S1-ZIP		

I do hereby certify that the information supplied with this filling 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.