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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # K74687**

## FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90178 039 \*\*\*150.00

GREENS	Berg environmental, in	IC.					
Principal Place	e of Business	Mailing Address			I (BSIGIL) and span, proce birth (911); (80), and	[[] UI311	(8): 4:5:: 189:
9960 CYPRESS LAKE DR. 9960 CYPRESS LAKE DR. FT. MYERS FL 33919 FT. MYERS FL 33919					DO NOT WRITE IN TH	HIS SPACE	
					3. Date Incorporated or Qualifed		
					03/28/1989		l
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	App	plied For
21		26 28435 Openfield Loop		65-0113787	Not	Applicable	
Suite, Apt. #, etc.		Suite. Apt. #. etc.			5. Certifcate of Status Desired - \$8.75 Additing Fee Require		
City & State	re	City & State		·	6. Election Campaign Financing	\$5.00	Mav Be
23		28 Wesley Chape	1 Flo	rida	Trust Fund Contribution	Added to	•
Zip	Country	Zip	Country	у	8. This corporation owes the current year	Intangible	
24	25	<b>29</b> 33543	30 USA	<u> </u>	Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent		,	10. Name and Address of New Register	ed Agent	
005	CNDEDO JANET D		81	Name			
	ENBERG, JANET B		82	Street Addr	ess (P.O. Box Number is Not Acceptable)		_
9960 CYPRESS LAKE DRIVE FT. MYERS FL 33919							_
F1. I	MIEU2 LF 22818	•	83	3			
			. 84	1 City	F	85 Zip C	Code
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered Age	ent signature require	d when reinstating) DATE		
12.		ND DIRECTORS	13.	ant signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		
12.	OFFICERS AN		13.			AND DIRECTO	RS IN 12
12. TITLE NAME	OFFICERS AN TS GREENBERG, JANET B	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME				
12. TITLE NAME STREET ADDRESS	OFFICERS AND TS GREENBERG, JANET B 9960 CYPRESS LAKE DR.	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	ET ADDRESS			
12. TITLE NAME STREET ADDRESS CITY- ST- ZIP	OFFICERS AND TS GREENBERG, JANET B 9960 CYPRESS LAKE DR. FT. MYERS FL	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5	ET ADDRESS			
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14. 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 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, with all other like empowered.

SIGNATURE:

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/ /Janet B. Greenberg

4-8-99

813-991-4655

Daytime Phone #