

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L19468

FILED
Apr 30, 2003
Secretary of State

Entity Name: ENVIRONMENTAL CAPITAL HOLDINGS, INC.

Current Principal Place of Business:

6622 SOUTHPOINT DRIVE SOUTH
STE. 310
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6622 SOUTHPOINT DRIVE SOUTH
STE. 310
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-2993987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCP () Delete
Name: ALBRIGHT, GEORGE F
Address: 1690 HEMPFIELD DR
City-St-Zip: YORK, PA 17404

Title: D () Delete
Name: DER KINDEREN, MARC
Address: 20 PARK AVE, APT 7
City-St-Zip: NEW YORK, NY 10016

Title: D () Delete
Name: MULDER, FRED
Address: UTRESCHTSWEG 35/10, 1213 TL HILVERSUM
City-St-Zip: THE NETHERLANDS, OC

Title: DVT () Delete
Name: WEEKS, CONNIE
Address: 6858 PLUM LANE E
City-St-Zip: JACKSONVILLE, FL 32250

Title: DVS () Delete
Name: BOLLMAN, INDIE B
Address: 612 15TH AVENUE S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CONNIE WEEKS

DVT

04/30/2003

Electronic Signature of Signing Officer or Director

Date