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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

(6)

HIGH VOLTAGE ENVIRONMENTAL APPLICATIONS, INC.

**FILED** Apr 27 1998 8:00am Secretary of State



								_				
Principal Place of Business Mailing Address									- I AMBAINIA NIA WANAY MBIDI WANAN ANDRA		i alalı diğel	#1#11 #1#11 <b>1#</b> #1
9562 DORAL BLVD 9562 DORAL BLVD. MIAM FL 33178				9562 DORAL BLVD 9562 DORAL BLVD. MIAMI FL 33178					DO NOT WRIT	E IN THIS	SPACE	
US US									3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address									12/29/1989			
			NT 111	2a. Mailing Address				DT 11D	4. FEI Number			Applied For
21 3613 DEL PRADO BLVD. Suite, Apt. #, etc.				26 3613 DEL PRADO BLVD Suite, Apt. #, etc.				RLAD	65-0165835		<del></del>	Not Applicable
22				27					5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State  23 CAPE CORAL, FLORIDA				City & State 28 CAPE CORAL, FLORIDA				RIDA	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country			Zip Coun			ý		8. This corporation owes or has paid the current year Intangible			
24 339		26 US	_	29 33904		30		US	Personal Property Tax due Jun		Yes	∐ No
9. Name and Address of Current Registered Agent									10. Name and Address of New R	egistered	Agent	
KURUCZ, CHARLES N								Name				
79 M			82	2	Street Addre	ddress (P.O. Box Number is Not Acceptable)						
***						83	7	· · · · ·				
					84	1 7	City		FL	85 Z	ip Code	
41 Durauant	to the provin	ions of Costion	607 0500	and 607 1609. Flori	da Cintuta	o the ebe	Ţ	annad aaraa	votion submits this statement for the		, L	a ita raalatarad
office or agent. I	registered aç am familiar w	gent, or both, in ith, and accept	the State of the obligation	Florida. Such char ons of, Section 607	nge was at 1.0505, Flor	uthorized b rida Statute	y th	he corporation	oration submits this statement for the on's board of directors. I hereby acce	pt the app	ointment	as registered
SIGNATURE	Strongt we have	or printed name of ri	noutered econt e	od Idia if applicable	(NOTE	- Bacislared &c		e ignature secution	d when reinstating)	DATE		
12.	argitatore, typec						13,		ADDITIONS/CHANGES TO OFFI		DIRECT	ORS IN 12
TITLE	0				ELETE	1.1 TITLE		I			Chang	
NAME	KURUC	Z, CHARLES	N			1.2 NAME					_	
STREET ADDRESS	1	W 135TH ST	••			1.3 STREE	T AD	ODRESS				
CITY - ST - ZIP	MIAM!					1.4 CITY-						
TITLE	D	<del></del>		□ D	ELETE	2.1 TITLE					☐ Chang	e Addition
NAME	WAITE.	THOMAS D				2.2 NAME						
STREET ADDRESS		W 103RD AVE	<u> </u>			2.3 STREE	T AD	DRESS				
CITY-ST-ZIP	MIAMI (		-			2. 4 CITY	ST-	.ZIP				
TITLE	D			□ D	ELETE	3.1 TITLE					Chang	je 🔲 Addition
NAME	COOPE	R, WILLIAM J	l.			3.2 NAME						
STREET ADDRESS		S.W. 74 TERR				3.3 STREE	T AD	DORESS				
CITY-ST-ZIP	MIAMI					3.4. CITY-	· \$1 -	ZIP				
TITLE	D			□ D	ELETE	4.1 TITLE					Chang	e Addition
NAME	WIRGIN	I. JORGEN				4. 2 NAME	Ē					
STREET ADDRESS		ARASOTA CT				4.3 STREE	TAD	DRESS				
CITY-ST-ZIP		ORAL FL				4.4 CITY						
TITLE	D			□ D	ELETE	5.1 TITLE					Chang	e Addition
NAME	MANSS	ON, LARS				5.2 NAME		ĺ				
STREET ADDRESS		EL PRADO BI	LVD			5.3 STREE		DORESS				
CITY-ST-ZIP		ORAL FL	- · <del>-</del>			5.4 CITY-						
TITLE				□ D	ELETE	6.1 TITLE					Chang	je 🔲 Addition
NAME						6.2 NAME						
STREET ADDRESS						6.3 STREE		DDRESS				
CITY-ST-ZIP						6.4 CITY		l l				

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 out an attachment with an address.