:COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

FILED
Jul 08, 1999 8:00 am
Secretary of State
07-08-1999 90032 024 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

)OCUMENT # L50311

Corporation Name
HYDRO TERRA ENVIRONMENTAL SERVICES, INC.

rincipal Place of Business
34 TALBOT AVE
IITE 3
CKSONVILLE FL 32205

Mailing Address
1834 TALBOT AVE
SUITE 3
JACKSONVILLE FL 32205
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/09/1990

4. FEI Number: 59-2994437 — Applied For / Not Applicable

Principal Place of Business	2a. Mailing Address
	26
Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
City & State	28 City & State
Zip / 25 Country	29 Zip / 30 Country

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SMITH, EDWARD A
1834 TALBOT AVE
SUITE 3
JACKSONVILLE FL 32205

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

1. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. *I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.*

IGNATURE ______ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

CR2E034 (5/99)

!. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
LE	VP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
ME	SMITH, JUDITH A		1.2 NAME		
REET ADDRESS	3526 HERSCHEL ST		1.3 STREET ADDRESS		
Y-ST-ZIP	JACKSONVILLE FL 32205		1.4 CITY-ST-ZIP		
LE	P	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
ME	SMITH, EDWARD A.		2.2 NAME		
REET ADDRESS	1834 TALBOT AVE, SUITE 3		2.3 STREET ADDRESS		
Y-ST-ZIP	JACKSONVILLE FL 32205		2.4 CITY-ST-ZIP		
LE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
ME			3.2 NAME		
REET ADDRESS			3.3 STREET ADDRESS		
Y-ST-ZIP			3.4 CITY-ST-ZIP		
LE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
ME			4.2 NAME		
REET ADDRESS			4.3 STREET ADDRESS		
Y-ST-ZIP			4.4 CITY-ST-ZIP		
LE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
ME			5.2 NAME		
REET ADDRESS			5.3 STREET ADDRESS		
Y-ST-ZIP			5.4 CITY-ST-ZIP		
LE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
ME			6.2 NAME		
REET ADDRESS			6.3 STREET ADDRESS		
Y-ST-ZIP			6.4 CITY-ST-ZIP		

I. 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.

:IGNATURE: EDWARD A. SMITH, PRES. Edward A. Smith 7-1-99 904-3899222