

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2008 08:00 AM
Secretary of State

DOCUMENT # L50311

1. Entity Name
HYDRO TERRA ENVIRONMENTAL SERVICES, INC.



Principal Place of Business

**1834 TALBOT AVE
SUITE 3
JACKSONVILLE, FL 32205 US**

Mailing Address

**1834 TALBOT AVE
SUITE 3
JACKSONVILLE, FL 32205 US**



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2994437

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	SMITH, JUDITH A
STREET ADDRESS	3526 HERSCHEL ST
CITY-ST-ZIP	JACKSONVILLE, FL 32205
TITLE	P
NAME	SMITH, EDWARD A.
STREET ADDRESS	1834 TALBOT AVE, SUITE 3
CITY-ST-ZIP	JACKSONVILLE, FL 32205
TITLE	VP
NAME	SMITH, DORVAK A
STREET ADDRESS	1834 TALBOT AVE., STE. 1
CITY-ST-ZIP	JACKSONVILLE, FL 32205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/05/08-80060-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Judith A. Smith
Judith A. Smith
Vice President

Date

1-24-08

Daytime Phone #

904-389-9222