

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO NEW STATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 AUG -2 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L55075** (0)
1. Corporation Name
PACO POLLUTION ABATEMENT COMPANY

Principal Place of Business Mailing Address
% HAROLD W. MULLIS, JR. **% HAROLD W. MULLIS, JR.**
101 E. KENNEDY BLVD., 2700 BARNETT PLAZA **101 E. KENNEDY BLVD., 2700 BARNETT PLAZA**
TAMPA FL 33602 **TAMPA FL 33602**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **03/06/1990** 3a. Date of Last Report **07/28/1994**

4. FEI Number **59-3000348** Applied For ☐ Not Applicable ☐

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

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

6. This corporation has liability for intangible tax under s. 190.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 **% PETER FORD** 26 **P.O. Box 13407**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **4309 TYSON AVE.** 27
City & State City & State
23 **TAMPA FLORIDA** 28 **TAMPA FLORIDA**
Zip Country Zip Country
24 **33611** 25 **USA.** 29 **33621-3407** 30 **USA**

9. Name and Address of Current Registered Agent
MULLIS, HAROLD W., JR.
101 E. KENNEDY BLVD.
2700 BARNETT PLAZA
TAMPA FL 33602

10. Name and Address of New Registered Agent
81 Name **PETER J. FORD**
82 Street Address (P.O. Box Number is Not Acceptable)
4309 TYSON AVE.
83
84 City **TAMPA** FL 85 Zip Code **33611**

11. 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.

SIGNATURE *Peter J. Ford* **PETER J. FORD** DATE **7-27-95**
(Signature, typed or printed name of registered agent and the Principal) (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS
TITLE **D**
NAME **RICHMAN, JERALD**
STREET ADDRESS **1530 N. DEARBORN PKWY.**
CITY- ST- ZIP **CHICAGO IL**
TITLE **PD**
NAME **SHIMS, WILLIAM V JR.**
STREET ADDRESS **140 CHIPPEWA**
CITY- ST- ZIP **TAMPA FL**
TITLE **STV**
NAME **ARDEMA, JAMES**
STREET ADDRESS **1311 FALLSMEAD COURT**
CITY- ST- ZIP **OLDSMAR FL**
TITLE **D**
NAME **ARDEMA, JAMES**
STREET ADDRESS **1311 FALLSMEAD COURT**
CITY- ST- ZIP **OLDSMAR FL**
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *James Arde* **James Arde** DATE **7/25/95**
(Signature and typed or printed name of signing officer or director) (Date) (Daytime Phone #)

CR2E034 (3/95)