FILE NOW: FILING FEE AFTER MAY 1ST IS \$5 0.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortlan

Secretary of Stale
DIVISION OF CORPORATIONS

DOCUMENT # L712

.71238

(4)

ENVIROTEMP, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1998 8:00am Secretary of State



2510 NE 18TH TERRACE GAINESVILLE FL \$2602 US				P. O. BOX 90014 GAINESVILLE FL 32607				DO NOT WRITE	IN THIS S	PACE			
								3. Date Incorporated or Qualified 05/08/1990					
2. Principal Place of Business			<u></u> ⊢₁	2a. Mailing Address				4. FEI Number			Applied For		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				59-3007056	Not Applicable \$8.75 Additional			1	
22			27	 1				6. Certificate of Status Desired Fee Required					
City & State			<u>├</u> , `	City & State			Election Campaign Financing \$5.00 May Be					1	
23	Zip	Country	28				····	Trust Fund Contribution			ded to		4
24		25 29 30				ili y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.					
	9, Name	Current Registered	stered Agent				10. Name and Address of New Registered Agent						
GROSS, ALLEN PAUL						81	Name						
	3477 NW 101					82	Street Add	ress (P.O. Box Number is Not Acceptable)					1
Gainesville FL 32605						83						*	-
					-	84	City			85	Zip Co	ndo.	4
ļ							·		<u>FL</u>	1	•		
11.	office or registered as	nent or both in th	ne State of Florida, Su	authorized	l hv	the cornors	poration submits this statement for the partion's board of directors. I hereby accep	urpose of	changi intmer	ing its	registered egistered		
	agent. I am familiar w	ith, and accept the	ne obligations of, Sec	tion 607.05 05, Fi	orida Statu	ites.		, i				Ū	
SIG	NATURE Signature, types	d or printed name of rog-	istered agent and title if applic	able (NOT	E: Registered	Ager	nl signature regu	uired when reinstating)	DATE				ـ ا
12.		OFFICE	RS AND DIRECTOR	S	13.			ADDITIONS/CHANGES TO OFFIC		DIREC	TORS	IN 12	1
TITLE					1.1 TH	LE				Cha	inge	Addition	15
NAM		, ALLEN PAUL				1.2 NAME		•					2
STRE		W 10TH AVE		1.3 51		1.3 STREET ADDRESS							ŭ
		SVILLE FL		T beretë	1.4 CIT		- ZIP			-1 -			ۆ_ ۇ
TITLE		BETTY J.		☐ DEŁETÉ	2.1 TITI 2.2 NAI				l	Cha	nge	Addition	۲
NAM	AFOO M	W 10TH AVE.		1									
STREET ADDRESS 3902 NW 101H AVE. CITY-ST-ZIP GAINESVILLE FL							ADDRESS						
TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ DELE TE	2. 4 CIT		1 - ZIP		1	Cha	nne	Addition	+
NAM					3.2 NA						ngo		
	ET ADDRESS						ADDRESS						
	-ST-ZIP			3.4. Cf									
TITLE			·- · · · · · · · · · · · · · · · · · ·	DELETE 4.1 TI						Cha	nge	Addition	1
NAME				4.2 N									
STREET ADDRESS				4.3 ST			NDDRESS						
CITY	-ST-ZIP				4.4 CIT	Y-ST	- ZIP						
TITLE				DELETE	5.1 TITL	.E				Cha	nge	Addition]
NAM	E				5.2 NA	νE							
STRE	ET ADDRESS				5.3 STR	EET A	ADDRESS						
	-ST-ZIP				5.4 CIT		- ZIP					—	
TITLE				L DELETE	6.1 (1)				ŧ	Char	nge	Addition	
NAM-					6.2 NAM		!						
STREET ADDRESS							IDDRESS						
CITY	-ST-ZIP				6.4 CIT	Y-ST	- ZIP						╝

14. Thereby 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.