PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **L78213**

1. Corporation Name

R S ENVIRONMENTAL SERVICES, INC.

Principal Place of Business		Mailing Address							
1400 N.W. 13TH	AVE.	1400 N.W. 13TH AVE.							
POMPANO BEACH FL 33069-1906		POMPANO BEACH FL 33069-1906					00105		
US		US		DO NOT WRITE IN THIS SPACE					
					**	porated or Qualifed			
					06/06/19				
<u> </u>	ace of Business	2a. Mailing Address			4. FEI Numb			\vdash	Applied For
21 .		26			65-0204	082			Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certifcate	of Status Desired			Additional Required
22		27			ļ				
City & State		City & State		1	ampaign Financing			May Be	
		28		+	I Contribution			to Fees	
Žip	Country	Zip	Country		1	ration owes the curr	ent year Inta		*
24		29 30	<u> </u>			Property Tax.		☐Yes	≥ No
	9. Name and Address of Current	Registered Agent	- 04		10. Name and	Address of New I	tegistered /	Agent	
CHE	DVEDE DICHARD		81	Name M	lichae l	Levite	sKu		-
	RKERS, RICHARD		82		ss (P.O. Box Nu	mber & Not Accept	able)		
	5 EUREKA ST.			141	NWI	3. HAR			
BOCA RATON FL 33428			83	•	•				
1			84	City /)		- <u>1</u>		85 Zip	Code
				$ ^{\prime}$ $^{\prime}$ $^{\prime}$ $^{\prime}$	mpano	peach	、 FL	. ব	3067
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 of the purpose of changing its re									
office or re	egistered agent or both, in the State of	of Florida. Such change was auth	orized by the Statutes	ne corporation	n's board of direc	ctors. I hereby acce	ot the appoir	ntment as r	registered
l	The state of the s	V 4.14.	i Cididico.			4/:	26/99		•
SIGNATURE Signature, typed or printed name of registered agey and title if applicable. (NOTE: R				signature required	when reinstating)		DATE		
12.	OFFICERS (A)	DIRECTORS	13.		ADDITIONS	CHANGES TO OF	FICERS AN	D DIRECT	ORS IN 12
TITLE	DP	DELETE	1.1 TITLE					☐ Change	Addition
NAME	SMERKERS, RICHARD	/ `	1.2 NAME						
STREET ADORESS	10815 EUREKA ST.		1.3 STREET A	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33428		1.4 CITY-ST-	i					
TITLE	DVTS	☐ DELETE	2.1 TITLE		4			☐ Change	e Addition
NAME	LEVITSKY, MICHAEL	_	2.2 NAME						
STREET ADDRESS	8016 SW 22ND COURT		2.3 STREET A	VUDDESS					
	DAVIE FL 33324		2.4 CITY-ST-						
CITY-ST-ZIP			3.1 TITLE	-ДР				Change	e Addition
TITLE			3.2 NAME						_
NAME		i							
STREET ADDRESS			3.3 STREET A						
CITY-ST-ZIP		- Declett	3 4. CITY-ST-	-219				☐ Change	e Addition
TITLE		☐ DELETE	4.1 TITLE						,
NAME	•		4. 2 NAME						
STREET ADDRESS			4.3 STREET A	ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST-	ZIP					
TITLE		☐ DELETE	5.1 TITLE					☐ Change	e Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET A	ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-	ZIP					
TITLE		☐ DELETE	6.1 TITLE					Change	e 🔲 Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET A	ADDRESS					

6.4 C/TY-ST-ZIP

SIGNATURE:

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, or final attacking with an address with all other like empowered.

May 05, 1999 8:00 am Secretary of State

05-05-1999 90019 036 ***150.00

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