

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **N47415** (7)

95 JAN 23 AM 9:11

1. Corporation Name

ARK ENVIRONMENTAL FOUNDATION U.S., INC.

Principal Place of Business

Mailing Address

*MICHAEL J. FINGAR, P.A.-THE SENATOR BLDG.
13899 BISCAYNE BLVD., #155
NORTH MIAMI BEACH FL 33181

*MICHAEL J. FINGAR, P.A.-THE SENATOR BLDG.
13899 BISCAYNE BLVD., #155
NORTH MIAMI BEACH FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/21/1992

3a. Date of Last Report
03/08/1994

4. FEI Number
65-0316950

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip 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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FINGAR, MICHAEL J.
THE SENATOR BLDG.-SUITE 155
13899 BISCAYNE BOULEVARD
NORTH MIAMI BEACH FL 33181

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

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

Signature, typed or printed name of registered agent and (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **PRED, STANLEY M.**
STREET ADDRESS **THE SENATOR BLDG. PH2-13899 BISCAYNE BLVD.**
CITY-ST-ZIP **N. MIAMI BEACH FL 33181**

TITLE **D**
NAME **JEPHCOTT, GREGORY**
STREET ADDRESS **498 HARROW RD.**
CITY-ST-ZIP **LONDON, ENGLAND**

TITLE **DVST**
NAME **LANE, JERE J.**
STREET ADDRESS **11538 N.W. 10TH STREET**
CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE **CFO**
NAME **LANE, JERE J.**
STREET ADDRESS **11538 N.W. 10TH STREET**
CITY-ST-ZIP **PEMBROKE PINES FL 33026**

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 **MANTEL, ESTHER N.**
3.3 STREET ADDRESS **BLVD.**
3.4 CITY-ST-ZIP **THE SENATOR BLDG-13899 BISCAYNE/**
NORTH MIAMI BEACH, FL 33181

4.1 TITLE Change Addition
4.2 NAME **CFO**
4.3 STREET ADDRESS **MANTEL, ESTHER N.**
4.4 CITY-ST-ZIP **BLVD.**
THE SENATOR BLDG-13899 BISCAYNE/
NORTH MIAMI BEACH, FL 33181

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or any attachment with an address.

SIGNATURE:

Stanley M. Pred
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/95

(305) 947-2265

Date

Corporate/Phone #