2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P0000004437 1. Entity Name ENVIRONMENTAL CONTROL INDUSTRIES, INC. Principal Place of Business 3007 GREENE STREET HOLLYWOOD, FL 33020 Mailing Address 3007 GREENE STREET HOLLYWOOD, FL 33020 01102008 No. 4. FEI Number 65-0978264 5. Certificate of State

FILED Apr 18, 2008 08:00 A Secretary of State

Applied For



01102008	No Cha-P	CR2E034 (11/05)	
((1) 14 (1) 18 (1) 18 (1) 18		

65-0978264 Not Applicable

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

6. Name and Address of Current Registered Agent

LOZANO, LISA 1408 NORTH PARK ROAD HOLLYWOOD, FL 33021

DO NOT WRITE IN THIS SPACE

the obligate	itions of registered agent			e required when reinstating)	4-1-08 DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000907363 05705709-80035-011 158 75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D LOZANO, ROBERT JR. 1408 NORTH PARK ROAD HOLLYWOOD, FL 33021	TORS	DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOZANO, LISA 1408 NORTH PARK ROAD HOLLYWOOD, FL 33021					
NAME STREET ADDRESS CITY-ST-ZIP	D LOZANO, ROBERTO RIOS SR. 3241 ABBOTT LANE HOLLYWOOD, FL 33021					
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					. .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·	
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information						

12. I nereby certify that the information supplied with this filling 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

4/1/08

954 907-688C

Daytime Phone #