2002 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNING OFFICER OR DIRECTOR

Apr 24, 2002 8:00 am Secretary of State P00000116062 DOCUMENT # 1. Entity Name 04-24-2002 90304 009 ***150.00 ENVIRONMENTAL SERVICES & SUPPLIES. INC. Mailing Address Principal Place of Business 550 NW 78TH TERRACE APT #206 550 NW 78TH TERRACE APT #206 MARGATE FL 33063 MARGATE FL 33063 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite. Apt. #. etc. Applied For 4. FEI Number City & State City & State APPLIED FOR Not Applicable 65-1081753 7in Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent من د چوانو د پایان بازد امروم سی RUCK, RADU Street Address (P.O. Box Number is Not Acceptable) 550 NW 78TH TERRACE APT #206 MARGATE FL 33063 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change ☐ Delete TITLE PTD TITLE RUCK, RADU NAME NAME STREET ADDRESS 550 NW 78TH TERRACE #206 STREET ADDRESS CITY-ST-ZIP MARGATE FL 33063 CITY-ST-ZIP ☐ Addition ☐ Change **VPST** ☐ Delete TITLE TITLE CIOBANU, SIRENA NAME NAME 550 NW 78TH TERRACE #206 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MARGATE FL 33063 ☐ Change ☐ Addition ☐ Delete TITLE VΡ TITLE NAME RUCAREANU, GHEORGHE NAME STREET ADDRESS 550 NW 78TH TERRACE #206 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARGATE FL 33063 Change □ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE. ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITI E NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 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 of fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #

CR2E034 (9/01

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