

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000044046

FILED
Apr 30, 2003
Secretary of State

Entity Name: ENVIROCARE SOLUTIONS, INC.

Current Principal Place of Business:

620 SE 13TH STREET
CAPE CORAL, FL 33990

New Principal Place of Business:

16880 GATOR ROAD
#204
FORT MYERS, FL 33912

Current Mailing Address:

620 SE 13TH STREET
CAPE CORAL, FL 33990

New Mailing Address:

PO BOX 150822
CAPE CORAL, FL 33915

FEI Number: 02-0589986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAY, CHRIS
620 SE 13TH STREET
CAPE CORAL, FL 33990

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZENI, NELVO J
Address: 1339 SUNWOOD DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: VT () Delete
Name: BISHOP, MELISSA
Address: 620 SE 13TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: ST (X) Delete
Name: ZENI, SANDRA D
Address: 1339 SUNWOOD DRIVE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: FAY, MELISSA A
Address: 620 SE 13TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: D (X) Change () Addition
Name: FAY, CHRISTOPHER S
Address: 620 SE 13TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER S FAY

D

04/30/2003

Electronic Signature of Signing Officer or Director

Date