2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075413

KAPLAN, LEE

3111 SE 24TH AVE

OCALA, FL 34471

Name:

Address: City-St-Zip:

Entity Names ENVIDOTECH COLUTIONS

FILED Mar 01, 2005 Secretary of State

Entity Name: ENVIROTECH SOLUTIONS, INC. **Current Principal Place of Business: New Principal Place of Business:** OCALA, FL 34480 **Current Mailing Address: New Mailing Address:** 5760 SE 41 ST OCALA, FL 34480 FEI Number: 20-0109450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TROW, CHESTER J 1 NE FIRST AVE STE 303 OCALA, FL 34470 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DAWSON, EMILY Name: Name: PO BOX 1194 Address: Address: City-St-Zip: SILVER SPRINGS, FL 34489 City-St-Zip: Title: Title: VΡ () Delete (X) Change () Addition DAWSON, VIRGINIA Name: Name: KAPLAN, LEE 3290 GLENCAIRN RD 3111 SE 24TH AVE Address: Address: SHAKER HEIGHTS, OH 44122 OCALA, FL 34471 City-St-Zip: City-St-Zip: Title: Title: VΡ (X) Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: EMILY DAWSON D 03/01/2005