2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 16, 2008 08:00 A Secretary of State

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DOCH	MENT£	£ P05000059164	4

1. Entity Name

GALAHAD ENVIRONMENTAL INCORPORATED



Principal Place of Business

3728 20TH STREET NORTH ST. PETERSBURG, FL 33713 Mailing Address

3728 20TH STREET NORTH ST. PETERSBURG, FL 33713



04102008

No Chg-P

CR2E034 (11/05)

4. FEI Number 22-3864182 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

SPRINKMANN, JEFFREY S 3728 20TH STREET NORTH ST. PETERSBURG, FL 33713

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the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered office	or registered agent, or b	oth, in the State of Florida. I am familiar wit	h, and accept
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent argusture required when reinstating)			nature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. [\$5.00 May Be Added to Fees	000000901188 04/29/08-80060-00)6 150.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPRINKMANN, JEFFREY S 3728 20TH STREET NORTH ST. PETERSBURG, FL. 33713				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY- ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby o	certify that the information supplied with this file	ling does not qualify for the exemptions	contained in Chapter 11	19, Florida Statutes. I further certify that the	information

12. I hereby certify that the information supplied with this filing 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:

SNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

1/15/08 127.656 85

Daytime Phone #