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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P18170

1. Corporation Name

FIRST ENVIRONMENT, INC.

Principal Place of Business Mailing Address						1				
90 RIVERDALE RD 90 RIVERDALE RD RIVERDALE NJ 07457 RIVERDALE NJ 07457						DO NOT WRITE IN THIS SPACE				
16	,	•			ļ	3. Date Incorporated or Qualifed 02/26/1988			,-	Ī.
2. Principal Place of Business 2a. Mailing Address			~			4. FEI Number		T	Appl	ied For
21		26				22-2902916			Not /	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			~ 	5. Certificate of Status Desired S8.75 Additional Fee Required				
22	· · · · · · · · · · · · · · · · · · ·	City & State							<u>-</u>	
City & State		28				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip	Country	Zip	Countr	y		This corporation owes the current	ent ye		_	_
24 25		29 30				Personal Property Tax.		Yes	Ĺ	No
9. Name and Address of Current Registered Agent						10. Name and Address of New R	egist	tered Agent		
THE	PRENTICE-HALL CORPORATION	SYSTEM INC.	81		Name					
1201 HAYS STREET			82		Street Addres	ss (P.O. Box Number is Not Accepta	ble)	18 18 4 B B B B B B B B B B B B B B B B B B		* * 61 . X a
SUITE 105 TALLAHASSEE FL 32301			83	3		· · · · · · · · · · · · · · · · · · ·				
· · · ·			84		City			医瞳孔丛丛	ip Co	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE										
12.	OFFICERS AND		13.		agnatura roquirea n	ADDITIONS/CHANGES TO OFF			TOR	S IN 12
TITLE	PCT	DELETE	1.1 TITLE			ABBRIORE COLUMN		Chang		Addition
		C becere	1.2 NAME						•	
NAME	DEDITE, DEMAND 1.									
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TITLE	SD	€ DELETE	2.1 TITLE					□ Citali	10	☐ Addition
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NAME ,	(4) 100 Per 1 1 1 1 1 1 1 1 1 1	· (; ,	3.2 NAME							
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CITY-ST-ZIP		□ DELETE	3.4. CITY-		ZIP	* * * * * * * * * * * * * * * * * * *	-	∵ Chan		Addition
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NAME . ' '			4. 2 NAME	E		. ,				-
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CITY-ST-ZIP			4.4 CITY		ZIP					
TITLE .		☐ DELETE	5.1 TITLE	ŧ	\			☐ Chan	је	☐ Addition
NAME	· ·	•	5.2 NAME	3				•		.
STREET ADDRESS		·	5.3 STRE	ET A	ODRESS					

CITY-ST-ZIP 14. 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 annual report or supplemental annual peoprt 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 director o

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

□ DELETE