FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24844

(3)

NUWAY ENVIRONMENTAL, INC.

Principal Place of Business Mailing Address									
1741 CALKS F	erry RD	1741 CALKS FERRY RD							
LEXINGTON SO US	C 29073	LEXINGTON SC 29073-9803 US			3. Date Incorporated or Qualified 3a 06/20/1989		te of Last Report		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	VEIV		Applied For
21		26				57-0880680			Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.					/		Additional
22		27				5. Certificate of Stätus Desired		Fee F	Required
City & State	e	City & State			·	6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution	<u> </u>	Addec	d to Fees
Zip	Country	Z _i p	<u> </u>	intry		8. This corporation has liability for intan-			s. 199.032,
24	25 9. Name and Address of Curren	29	30	Τ		Florida Statutes Yes 10. Name and Address of New Registe	s 🗍		
DI IA		i negistereu Agent	*,*	81	Name	IO. Marile and Address of New Negiste	neu Ay	JOHE .	
	NNAGAN, WILLIAM B.								
	Marsh Lakes Dr Inandina BCH FL 32034			82	Street A	ddress (P.O. Box Number is Not Acceptable)			
FER	INANDINA DON PL 32034			83					
				84	City		FL	85 Zip	o Code
11. Pursuant	to the provisions of Sections 607.050:	2 and 607.1508, Florida Stat	utes, the a	bove bove	-named c	proporation submits this statement for the purpo	se of c	hanging	its registered
office or r	egistered agent, or both, in the State on tamiliar with, and accept the oblina	of Florida, Such change was	s authorize Florida Sta	d by	the corpo	oration's board of directors. I hereby accept the	appoir	ntment a	is registered
	or the transfer of the transfe				- -				
SIGNATURE	Signatural typical or purited name of regularical ago	nt and title if applicable (No	OTE: Registere	d Age	nt signature re	equired when reinstating) DA	ATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS			
TELE	PDS	☐ DELETE	1.1 Ti	TLE			Ľ	Change	Addition
NAME	rabley, Jonathan K		1.2 N	AME					
STREET ADDRESS	1741 CALKS FERRY ROAD		1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	LEXINGTON SC			ITY-\$	T-ZIP			-1	
THILE	VDT	DELETE	2 1 TI				L	_j Change	Addition
NAME	DUNNAGAN, WILLIAM B		22 N						
STREET ADDRESS	408 POINDEXTER CT				ADDRESS	<u>.</u> \$			
CITY+ST-ZIP TOTLE	LEXINGTON SC	DELETE	2. 4 C 3.1 Ti		ST-ZIP			Change	Addition
NAME		orecae	3.1 N				٠	7 0.19180	Addition
STREET ADDRESS					ADDRESS				
CITY-ST-7iP			- 1		ST-ZIP				
Trice		DELETE	4.1 TI		-		T	Change	Addition
NAME			4.21	IAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				
City - St - ZiP					T-ZIP				
TI'LE		DELETE	5.1 TI	TLE				Change	Addition
NAME			52 N	AME					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
COTY-ST-ZIP			5.4 C	ITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TI	TLE				Change	Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
City-St-7/P				ITY - S					
14. I do hereb informatic	by certify that the information supplied on indicated on this annual report or s	I with this filing does not qua applemental annual report is	ality for the s true and :	exe acci	mption sta irate and t	ated in Section 119.07(3)(i), Florida Statutes. I ful that my signature shall have the same legal effe	urther c ect as if	ertity that made u	at the inder oath: tha
l am an o	fficer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or trustee empo	owered to a	эхөс	ute this re	port as required by Chapter 607, Florida Statut	es; and	i that my	name