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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P28371 (3)

1. Corporation Name
ENVIRONMENTAL SYSTEMS PRODUCTS, INC.



Principal Place of Business
7 KRIPES RD.
EAST GRANBY CT 06026

Mailing Address
7 KRIPES RD.
EAST GRANBY CT 06026-9720

3. Date Incorporated or Qualified
03/05/1990

3a. Date of Last Report
02/06/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
06-1285832

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

F

ode

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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Registered
gistered

SIGNATURE

Signature of typist or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME TEDESCHI, RINALDO
STREET ADDRESS 7 KRIPES RD.
CITY-ST-ZIP E. GRANBY CT ☐ DELETE

11 TITLE Director ☐ Change ☒ Addition
12 NAME Barry Jameson
13 STREET ADDRESS 2 Beechwood Ln Culcheth
14 CITY-ST-ZIP Warrington Cheshire WA3 4HJ

TITLE T
NAME HAFTMAN, SCOTT
STREET ADDRESS 7 KRIPES RD.
CITY-ST-ZIP E. GRANBY CT ☐ DELETE

21 TITLE Treasurer/Secretary ☒ Change ☐ Addition
22 NAME Scott Haftmann
23 STREET ADDRESS 7 Kripes Rd
24 CITY-ST-ZIP E. Granby Ct

TITLE D
NAME GALE, JAMES C.
STREET ADDRESS 717 5TH AVE.
CITY-ST-ZIP NEW YORK NY ☒ DELETE

31 TITLE Director ☐ Change ☒ Addition
32 NAME Phil Barker
33 STREET ADDRESS 7 Breaks Garden Kippax
34 CITY-ST-ZIP Leeds West Yorkshire LS05 7LP

TITLE D
NAME BRAUNSTEIN, IRWIN
STREET ADDRESS 7 KRIPES ROAD
CITY-ST-ZIP E. GRANBY CT ☒ DELETE

41 TITLE Director ☐ Change ☒ Addition
42 NAME Alan Baxter
43 STREET ADDRESS Endon Hays Farm Dingle Lane Ruston
44 CITY-ST-ZIP Macclesfield Cheshire SK11 0RX

TITLE DS
NAME ZOLOT, NORMAN
STREET ADDRESS 284 AMITY ROAD
CITY-ST-ZIP WOODBRIDGE CT ☒ DELETE

51 TITLE Director ☐ Change ☒ Addition
52 NAME Anthony Fletcher
53 STREET ADDRESS White Hill Back Lane
54 CITY-ST-ZIP Lancashire BB12 7QP

TITLE PD
NAME MCKENNA, TERRENCE P
STREET ADDRESS 7 KRIPES RD
CITY-ST-ZIP EAST BRANBY CT ☐ DELETE

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

0001678

CR2E034 (9/96)