

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90022 013 ***150.00

DOCUMENT # P38203

1. Corporation Name

HMA ENVIRONMENTAL SERVICES, INC.

Principal Place of Business

3405 SOWELL LANE.
TEXARKANA TX 75503

Mailing Address

3405 SOWELL LANE.
TEXARKANA TX 75503

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/07/1992

4. FEI Number

75-2389074

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.,
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

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 DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

C
NAME MURRAY, HERBERT L.
STREET ADDRESS 3405 SOWELL LANE
CITY-ST-ZIP TEXARKANA TX

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

VST
NAME MURRAY, ROBERT H.
STREET ADDRESS 3405 SOWELL LANE
CITY-ST-ZIP TEXARKANA TX

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

D
NAME MATTHEWS, PHILLIP R.
STREET ADDRESS 3815 DACOMA
CITY-ST-ZIP HOUSTON TX

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

PD
NAME HORWITCH, GARY R.
STREET ADDRESS 3815 DACOMA
CITY-ST-ZIP HOUSTON TX

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 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 in an attachment with an address, with all other like empowered.

SIGNATURE:

Herbert L. Murray
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Herbert L. Murray 4-16-1999 903-838-8533

Date

Daytime Phone #

CR2E034 (11/98)