FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	996	DIVISION OF	CORPORA	ATIONS				
OCUM . Corporation N	IENT # P9200 0	0015374 (1)					
ENVIRO	MED COMPLIANCE, INC.							
rincipal Place o	f Business	Mailing Address			T MOULDALING MAKE MEN COURT DENT	Ağılı Balel ili	 	AAII AIRE IAA
607 S. ALEXANDER STE 201 PLANT CITY FL 33566 US		607 S. Alexander Ste 201 Plant City Fl. 33568						
		US	1.77		3. Date Incorporated or Qualified 12/30/1992 3a. Date of Last Rep 04/10/1999			
. Principal Place of Business		2a. Mailrig Address 26			4. FEI Number 59-3155820			oplied For ot Applicable
Suite, Apt. #, etc. STE 205		Suite, Apt. #, etc. 27 STE 205		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	Zip	30	intry		□ No		199.032,
L	9. Name and Address of Curren				10. Name and Address of New F	tegistered	Agent	
CAPRON, TERRY G 607 S ALEXANDER PLANT CITY FL 33566					cidress (P.O. Box Number is Not Acceptable)			
		Local CO / 1509 Clorida Statu	toe the abo	L L Due named carro	ration submits this statement for the pu rd of directors. Thereby accept the app	roose of ch	anaina its re	egistered office
SIGNATI IRE	i, and accept the obligations of Sect light in types or provided in Chapter of agent OFFICERS AN	acustic topologie (N		1 Agaid Sopratus Sopra	awbs.tensisley ADDITIONS/CHANGES TO OFF			
ILE	D	DELETE	l.	HITLE			Change	☐ Addition
AME	MALATINO, ANTHONY M 1238 VALLEY HILL DRIVE			AME STREET ADDRESS				
REET ADDRESS TY-ST-ZIP	LAKELAND FL 33813			DITY - ST-ZIP				
rite	DPT	DELETE		'ITLE			Change	☐ Addition
AME IREET ADDRESS	Capron, Terry G 2004 Golfview Drive N			NAME STREET ADDRESS				
TY-ST-ZIP	PLANT CITY FL	F3 NC F16		DITY-ST ZP			Change	Addition
TLE AME	DSV CAPRON BARBARA	DELETE		TITLE PAME			L Onlange	
FREET ADDRESS	2004 GOLFVIEW DR NO			STREET ADDRESS				
TY-ST-ZIP TLE	PLANT CITY FL DV	DELETE		DITY - S1 - ZIF			Change	Addition
ME	BRANNON, PAT	<u> </u>		NAME				
TREET ADDRESS	617 E TRAPNELL RD		43	STREET ADDRESS				
TY-ST-ZIP	PLANT CITY FL			CITY - ST - ZIP			D 01	- X2377
TLE	D TEN	☐ DELETE		TITLE			Change	Addition
AME .	Brannon, Ted 617 e Trapnell RD			NAME STREET ADDRESS				
REET ADDRESS	PLANT CITY FL			STREET ADDRESS CITY - ST - ZIP				
TLE	1 CART OIL 1 L	DELFIF		TIFLE			Change	Addition
AME		_	62	NAME				
TREET ADDRESS			63	STREET ADDRESS				
CITY - ST - ZIP			6.4	CITY - ST - ZIP		0.07/02/15	lacida Otre	100 15 450
					for the exemption stated in Section 11 rate and that my signature shall have to his report as required by Chapter 607, I			

SIGNATURE NO TYPE OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR 3-15-96

8/3-754-3001 Dayline Project