

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 4:08

DOCUMENT # P93000028790 (2)

1. Corporation Name

REKA ENVIRONMENTAL, INC.

Principal Place of Business

Mailing Address

8879 W. COLONIAL DR.
SUITE 155
ORLANDO FL 32818

8879 W. COLONIAL DR.
SUITE 155
ORLANDO FL 32818

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/19/1993
3a. Date of Last Report: 07/12/1994

2. Principal Place of Business

2a. Mailing Address

21 8879 W. Colonial Dr.

25 8879 W. Colonial Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 155

27 Suite 155

City & State

City & State

23 Ocoee, FL

28 Ocoee, FL

Zip

Country

Zip

Country

24 34761

25 USA

29 34761

30 USA

4. FEI Number
59-3195977

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

COOK, KATHERINE R
8879 W. COLONIAL DR.
SUITE 155
ORLANDO FL 32818

81 Name Cook Katherine R.
82 Street Address (P.O. Box Number is Not Acceptable)
8879 W. Colonial Dr.
83 Suite 155
84 City Ocoee FL 85 Zip Code 34761

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 registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	MORROW, REGINA D
STREET ADDRESS	8879 W. COLONIAL DR., SUITE 155
CITY-ST-ZIP	ORLANDO FL 32818
TITLE	D
NAME	COOK, KATHERINE R
STREET ADDRESS	8879 W. COLONIAL DR., SUITE 155
CITY-ST-ZIP	ORLANDO FL 32818
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	Ocoee, FL 34761
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	Ocoee, FL 34761
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.071 (9)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 107, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an addendum with an address.

SIGNATURE:

Katherine R. Cook Katherine R. Cook 2/11/95 407-695-4773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR