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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

P93000030379 (0)

ENVIRO AG PRODUCTS, INC.										}
Principal Place of 4020 58TH / VERO BEAC US	AVE	Mailing Address PO BOX 548 VERO BEACH FL 32 US	PO BOX 548 VERO BEACH FL 32961			-{				
03		00				3. Date Incorporated or Qualified 04/26/1993	3a. Date	of Last Re 14/28/1		
2. Principal Plac	ce of Business	2a. Mailing Address	¬ "			4. FEI Number			Applied For	
21		26	<u>.</u>			65-04 19256	Not Applicable			4
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	See Required			
City & State		City & State				6. Election Campaign Financing	\$5.00 May Be			İ
23		28				Trust runa Contribution — Added to rees				4
Zip 24	Country 25	Zip 29	Zip Country			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			199.032,	1
24	9. Name and Address of Currer		100	Ι		10. Name and Address of New R		gent		_
				81	Name					
THOMA	AS, BARBARA			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)			\dashv
4020 5	BTH AVE				0.0007,000		,			_
VERO I	BEACH FL 32966			83						1
				84	City			85 Zip	o Code	┥
					•		FL	1 1		_
or registere	the provisions of Sections 607.0502 d agent, or both, in the State of Flori n, and accept the obligations of, Sect	da. Such change was authoriz	ed by the o	ove-na corpo	amed corpora oration's boar	ation submits this statement for the pur d of directors. I hereby accept the appe	pose of char pintment as r	nging its r registered	egistered offic agent. I am	e
SIGNATURE _										. _
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: OFFICERS AND DIRECTORS			Agent	signature required	d when reinstating: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				⊣છે
12.	D OFFICERS AN	DELETE		13. 1. 1 TITLE		ADDITIONS/OFFANGES TO OFF		Change	Addition	CR2E034 (12/95)
NAME	CHESSER, MARY A			1.2 NAME			_			4
STREET ADDRESS	4020 58TH AVE			1.3 STREET ADDRESS						밝
CITY · S1 - ZIP	VERO BEACH FL 32966		1.4 C	1.4 CITY-ST-ZIP						
TITLE	D DELETE		2 1 1	2 1 TITLE				Change	Addition	၂၀
NAME	THOMAS, BARBARA A	•	2 2 NAME							
STREET ADDRESS	5645 38TH ST.		23 STREET ADDRESS		ADDRESS					
CITY - ST - ZIP	VERO BEACH FL 32966		24 C	2 4 CITY - ST - ZIP						
TITLE	DELETE		3 1 TITLE] Change	Addition	
NAME			3.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	€ nc) ere			3.4 CITY - ST - ZIP] Change	[☐ Addition	
TITLE	☐ DELETE			4. 1 TITLE 4.2 NAME			L	1 ouguige	□ Munion	
NAME					ADODECC					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE				4.4 CITY - ST - ZIP 5. 1 TITLE				Change	Addition	
NAME		_	5.2 NAME]			• •	_	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP							
THILE		☐ DELETE	6. 1 TITL] Change	Addition	
NAME			6.2 N	6.2 NAME						
STHEFT ADDRESS			635	6 3 STREET ADDRESS						
CITY - S1 - ZIP				6.4 CITY-ST-ZIP						
certify that	certify that the information supplied the information indicated on this ann am an officer or director of the corp Block 12 or Block 3 if changed, or	iual report or supplemental and oration or the receiver or truste	nual reporti e empowe	does is true ered to	s not qualify for e and accura o execute this	or the exemption stated in Section 119 te and that my signature shall have the s report as required by Chapter 607, Fi	.07(3)(k), Flor same legal e orida Statute	ida Statut effect as it is; and tha	les. I further f made under at my name	

Daytime Phone #