FILED Apr 20, 1999 8:00 am Secretary of State

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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**

DOCUMENT # **P93000048861**1. Corporation Name

ADVANCED GEO-MATERIALS SERVICES, INC.

•													
Principal Place	of Business	Mailing Address									••••	•	
10251 METRO F	PARKWAY	10251 METRO PARKWAY											
STE 119		STE 119					DO NOT WRITE IN THIS SPACE						
FT. MYERS FL	33912	FT MYERS FL 33912					3. Date Incorporated or Qualifed						
US		US				3.		•	Quamed				
		0-14-94-4					07/08/ FEI Num					plied For	-
— '	ace of Business	2a. Mailing Address					65-042				<u> </u>	ot Applicable	┨
21	4	Suite, Apt. #, etc.					007042	2109				Additional	1
Suite, Apt.	#, etc.					5.	Certifcat	e of Status I	Desired	. 🗸	.	equired	
City & State		27 City & State					-Election:	Campaign F	inancina		\$5.00	-May-Be	1
	<u> </u>	28						nd Contribut	-		•	to Fees	
Zip	Country	Zip	Col	intry	•	8		poration owe		ent vear Int			1
一 , '	25	29	30	-····· ,		0.	-	Property Ta		cin your un	Yes	□No	
24	9. Name and Address of Current		1001	1		10.		nd Address		Registered	Agent		1
	J. Harris and Addition C. Carrott	. Hogistorou zigoni		81	Name			***					1
DORAGH, PETE													4
9400	GLADIOLUS DRIVE		82			t Address (P.O. Box Number is Not Acceptable)							
SUIT	E 270			83									1
	T MYERS FL 33908			"				_					1
				84	City					FL	85 Zip	Code	
77	to the provisions of Sections 607.0502	and 607 4509. Florida Statut	on the c	bovo	named (comoratio	n cubmits	this stateme	ent for the		- I changing its	registered	-
office or re	egistered agent, or both, in the State o	of Florida. Such change was a	uthorize	d by 1	the corpo	oration's b	oard of dir	ectors. I he	eby acce	pt the appoi	intment as re	gistered	Ì
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Sta	lutes.					•				
SIGNATURE		ALOTE				equired when	\			DATE			Ι,
12.	Signature, typed or printed name of registered agen OFFICERS AN		13.	Agen	t signature re			NS/CHANGE	S TO OF		ND DIRECTO	ORS IN 12	1 8
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	1 0251 METRO P KWY, 119				ADDRESS	ı							{
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	CROMER, EARL S			AME	I	200	nille	ותח	me	~	•		
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OTDEET ADDRESS			6.3 9	TREET	ADDRESS	1							1

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

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP