

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 05 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000067202 (0)
 1. Corporation Name
WORLD ENVIRONMENTAL RESTORATION SERVICES, INC.



Principal Place of Business 9951 ATLANTIC BLVD # 462 JAX FL 32225 US	Mailing Address 3704 HOOVER LANE JACKSONVILLE FL 32211
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>SAME</u> Suite, Apt #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 <u>SAME</u> Suite, Apt #, etc. 27 City & State 28 Zip 29	3. Date Incorporated or Qualified 09/27/1993	4. FEI Number 59-3224970 Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
HITE, SUZAN P
9951 ATLANTIC BLVD
SUITE 462
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent
 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 D	<input type="checkbox"/> DELETE	1.1 TITLE PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HITE, SUZAN P		1.2 NAME	
STREET ADDRESS 3704 HOOVER LANE		1.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 32211		1.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LEE, CATI M		2.2 NAME	
STREET ADDRESS 5473 MARSH CREEK COURT		2.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL		2.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE V/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HITE, RONALD O		3.2 NAME	
STREET ADDRESS 3704 HOOVER LANE		3.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 32211		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: _____

CR2E034 (5/98)