## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 30, 2004 8:00 am Secretary of State

01-30-2004 90063 034 \*\*\*150.00

ANNUAL	REPORT	
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**DOCUMENT # P93000085629** 1. Entity Name CHEMICAL POLLUTION CONTROL, INC. OF FLORIDA - A 21ST CENTURY ENVIRONMENTAL MANAGEMENT COMPANY Principal Place of Business Mailing Address 44005867 5151 SAN FELIPE 5151 SAN FELIPE **SUITE 1600 SUITE 1600** HOUSTON, TX 77056 US HOUSTON, TX 77056 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0476480 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nama CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE - 128 6 ( 1 × 10) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10.1 11. SECRETARY PD TITLE TITLE ☐ Delete Change . ☐ Addition DEBORAH HUSTON RECATTO, BRIAN NAME NAME SISI SAN FELIPE . +1600 5151 SAN FELIPE STREET ADDRESS STREET ADDRESS HOUSTON TIL HOUSTON, TX 77056 CITY-ST-ZIP CITY-ST-ZIP 77056 VP TIΠE TITLE ☐ Delete ☐ Change Addition NAME THURSTON, PHIL NAME David Andrens 5151 SAN FELL PE, 4 1600 5151 SAN FELIPE STREET ADORESS STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 77056 CITY-ST-ZIP HOSTON TR77056 ☐ Delete TITLE ☐ Change ☐ Addition HUSTON, DEBORAH NAME NAME STREET ADDRESS 5151.SAN:FELIPE.- --STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 77056 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition ELFANT, NOEL NAME NAME 9700 HIGGINS ROAD STREET ADDRESS STREET ADORESS CITY-ST-ZIP ROSEMONT, IL 60018 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition . NAME NAME . . . . . . . . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or exercise the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trusted employered. 713-623-877 1-20-04 SIGNATURE: