

2002 UNIFORM BUSINESS REPORT (UBR) -

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90152 029 ***158.75

DOCUMENT # P93000086057

1. Entity Name

R.L. WEIGT ENVIRONMENTAL CONSULTANTS, INC.

Principal Place of Business

SE Bridge
8985 SE BRIDGE RD
STE A
HOBE SOUND FL 33455
US

Mailing Address

SE Bridge
8985 SE BRIDGE RD
STE A
HOBE SOUND FL 33455
US

2. Principal Place of Business

8985 SE Bridge Rd.
 Suite, Apt. #, etc.

3. Mailing Address

8985 SE Bridge Rd.
 Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0446857

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WEIGT, ROBERT L
9512 S.E. DUNCAN ST.
HOBE SOUND FL 33455

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **WEIGT, ROBERT L**
 STREET ADDRESS **9512 SE DUNCAN ST.**
 CITY-ST-ZIP **HOBE SOUND FL**

TITLE **VPD** ☒ Delete
 NAME **DEFILIPPO, DOMINICK**
 STREET ADDRESS **8198 SE SANCTUARY DRIVE**
 CITY-ST-ZIP **HOBE SOUND FL**

TITLE **STD** ☐ Delete
 NAME **WEIGT, WERNER**
 STREET ADDRESS **3060 N. ATLANTIC BLVD., #710**
 CITY-ST-ZIP **COCOA BCH. FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

14 March 2002 772-546-6253

CR2E034 (9/01)