



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000086057	
1. Entity Name R.L. WEIGT ENVIRONMENTAL CONSULTANTS, INC.	

Principal Place of Business 8985 SE BRIDGE RD STE A HOBE SOUND, FL 33455 US	Mailing Address 8985 SE BRIDGE RD STE A HOBE SOUND, FL 33455 US
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DO NOT WRITE IN THIS SPACE

	
01272004 No Chg-P	CR2E034 (10/03)
4. FEI Number 65-0446857	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$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**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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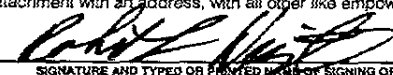
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WEIGT, ROBERT L 9512 SE DUNCAN ST. HOBE SOUND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD WEIGT, WERNER 3060 N. ATLANTIC BLVD., #710 COCOA BCH., FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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02/04/04-80063-021 158.75

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **President** **29 JAN 04** **772-546-6255**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #