

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

ANNUAL REPORT

1995



Department of Banking
and Finance
Tallahassee, Florida 32399-0001
Telephone: (904) 488-2000
Fax: (904) 488-2001

APPROVED
AND
FILED

95 MAR -1 PM 1:29

DOCUMENT # P94000006400 (3)

1. Corporation Name

SAFESOIL ENVIRONMENTAL CONSULTANTS INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

299 N.E. 3RD STREET
BOCA RATON FL 33432

Mailing Address

299 N.E. 3RD STREET
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/18/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-0466054

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes

Yes ☒ No ☐

9. Name and Address of Current Registered Agent

ROOT, JONATHAN S
301 YAMATO ROAD
SUITE 3101
BOCA RATON FL 33431

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 of 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

(Type or print name of officer or director who signed this statement)

(If FEI, Registered Agent signature required when not dated)

DATE

12. OFFICERS AND DIRECTORS

1. NAME	D
2. STREET ADDRESS	KOLARSICK, WILLIAM T
3. CITY, ST, ZIP	299 N.E. 3RD STREET
	BOCA RATON FL 33432
4. NAME	
5. STREET ADDRESS	
6. CITY, ST, ZIP	
7. NAME	
8. STREET ADDRESS	
9. CITY, ST, ZIP	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. NAME	
14. STREET ADDRESS	
15. CITY, ST, ZIP	
16. NAME	
17. STREET ADDRESS	
18. CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct to the best of my knowledge and belief. I further certify that the information supplied with 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. 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William T. Kolarsick*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM T. KOLARSICK

2/22/95 407-378-0379
Typed Name