FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000011534 (2) READ'S ENVIRONMENTAL PRODUCTS INC.

FILED Mar 23 1998 8:00am Secretary of State

Principal Place	9 NORTH	Mailing Addres P.O. BOX 1177 LIVE OAK FL	•					
US US						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified 02/11/1994		
2. Principal P	lace of Business	2a. Mailing Add	iress			4. FEI Number		oplied For
21		26				59-3229045		Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #	, etc.			5. Certificate of Status Desired		Additional
22		27						Required
City & Stat	e	City & State				6. Election Campaign Financing		D мау Ве
Zip	Country	28	1 00	untry		Trust Fund Contribution		to Fees
24	25	29	30	our in y		 This corporation owes or has paid the corporated Property Tax due June 30. 		ntangible No
	p. Name and Address of Curi			т—		10. Name and Address of New Registered		
RF	AD, JOHNNY L II			81	Name	101		
	HIGHWAY 129 NORTH				Ohre ed A side	(D.C. Bar Market 1911)		
LIVE OAK FL 32080				82	Street Addr	dress (P.O. Box Number is Not Acceptable)		
				83				
				84	City	FI	_ 85 Zip	o Cod€
agent I a	im familiar with, and accopt the ob					poration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate when religious particles and when religious particles are when religious particles are submitted to the purpose of the purpose particles are submitted to the purpose particles are submi		
12.		AND DIRECTORS	13.	!.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	PD	□ (DELETE 1.1 T	TITLE			Change	Addition
NAME	READ, JOHNNY L II		1.2 h	NAME				
STREET ADDRESS	7440 65TH DR.		1.3 S	STREET	ADDRESS			
CITY - \$1 - ZIP	LIVE OAK FL			CITY - ST	T-ZIP			A dee-
TITLE	STD DEMEDLY A	الا		TITLE			L Change	Addition
NAME	READ, BEVERLY A 7440 65TH DR.			NAME				
STREET ADDRESS	LIVE OAK FL				ADDRESS			
CITY-ST-ZIP TITLE	BIL OAK IL			CITY-S' TITLE	T-ZIP		Change	Addition
		<u>.</u>	1	NAME				L. TOSILION
NAME STREET ADMOSSS					ADDOLCC			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		П		CITY-S' TITLE	N-28		Change	Addition
NAME			1	NAME				
STREET ADORESS					ADDRESS			
CITY-ST-ZIP				CITY-ST				
TITLE				TITLE			☐ Change	Addition
NAME			5.2 M	NAME			_	
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP			•	CITY-ST				
TITLE				TITLE	1		Change	Addition
NAME			6.2 1	NAME				
STREET ADDRESS			6.3 9	STREET	ADDRESS			
CITY-ST-ZIP			6.4 0	CITY-ST	r-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 true and execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, it on an attachment with an address.

CICNIATUDE.

home I keep

3.17.97