PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P94000026323 (3)

DOCUMENT # P9400026323 (3) 1. Corporation Name ENVIRONMENT & Environmental Energy Technologies, Inc.									
-EX-TEN	ID-CORP. ENVICONM	nuntul Energy Tec	hnologies	$_{j}\mathcal{I}n$	C.				
Principal Place of Business Mailing Address			·			F TOOFIOOF END SMALL DIDIL DOUND DON	OBSIA OBSIA JIBAO O	NAMAD DISING DINOBAR TATU DOBE	
721 U.S. HIG SUITE 223 NORTH PALM	HWAY 1 I BEACH FL 33408	721 U.S. HIGHWAY 1 SUITE 223 NORTH PALM BEACH							
						 Date Incorporated or Qualified 04/06/1994 	3a. Date of L 10/1	Last Report 2/1995	
2. Principal Pla	ce of Business	2a. Mailing Address 26				4. FEI Number 65-0492034	·#	Applied For	
Surte, Apt. #	, etc.	Suite, Apt. #, etc.					<u>-</u>	Not Applicable 8.75 Additional	
22		27				5. Certificate of Status Desired	□ Ψ	Fee Required	
City & State		City & State			(Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζιρ 24	Country	Zφ	Country	y		8. This corporation has liability for i	ntangible tax un		
24 25 29 30 30 9. Name and Address of Current Registered Agent					Florida Statutes Yes No 10. Name and Address of New Registered Agent				
			81	Name			carored Age		
	LARRY F		82	Street	Address (ddress (P.O. Box Number is Not Acceptable)			
4270 D HAZEL AVE PALM BEACH GARDENS FL 33410			83	<u> </u>					
Trum of	Short Grandlino I E GOTTO			<u> </u>					
			84	'			FL 85 Zip Code		
 Pursuant to or registere 	the provisions of Sections 607.05 diagent for both, in the State of Fid	02 and 607.1508, Florida Statu onda, Such change was authori	tes the above zed by the con	named co	corporation s board of	i submits this statement for the pur directors. Thereby accept the appo	pose of changin	ig its registered office	
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12.	Synature: typed or printed rial ie of regions od aq OFFICERS A	ers আভনাস্থান্ত জন্ম প্র NND DIRECTORS	Off Registerer Age	n' signal re	Importal When	·····	GATE OF THE THE		
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NAME STREET ADDRESS			62 NAME			1 1 2	16		
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	certify that the information supplie	d with this filing is voluntarily fur	■ 64 CiTY-: nished and doc	si-ar is not qua	L alify for the	e exemption stated in Section 119	77(3)(k) Elorida	Statutes Lifurther	

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certification in the receiver of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certification in the receiver of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certification in the receiver of the corporation of the receiver of

SIGNATURE:

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR