

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
95 AUG 10 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P94000033178 (2)

1. Corporation Name

ECOSSE INTERNATIONAL INC.

Principal Place of Business

5254 VENICE WAY NE  
ST PETERSBURG FL 33703

Mailing Address

5254 VENICE WAY NE  
ST PETERSBURG FL 33703

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/29/1994

3a. Date of Last Report

2. Principal Place of Business

21 636 QUINTANA PLACE N.E.

Suite, Apt. #, etc.

22 City & State

23 ST. PETERSBURG FLORIDA

Zip

24 33703

Country

25 U.S.A.

2a. Mailing Address

26 636 QUINTANA PLACE N.E.

Suite, Apt. #, etc.

27 City & State

28 ST. PETERSBURG FLORIDA

Zip

29 33703

Country

30 U.S.A.

4. FEI Number

59-3240223

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. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

NASH, JOHN C  
5254 VENICE WAY NE  
ST PETERSBURG FL 33703

10. Name and Address of New Registered Agent

81 Name

NASH JOHN C

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

83

636, QUINTANA PLACE N.E.

84 City

ST. PETERSBURG

FL

85 Zip Code

33703

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 or 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

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

(NOTE: Registered Agent signature required when registering)

07/14/95  
DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included 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, and that my name appears in Block 12 or Block 13 (if changed) or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN C. NASH PRESIDENT

07/14/95

B13 528 8354