2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000044892

1. Entity Name
ENVIRO FIRE & WATER RESTORATION SERVICES, INC.

Principal Place of Business	Mailing Address
545 VIRGINIA AVE	545 VIRGINA AVE
PORT ORANGE, FL 32127	PORT ORANGE, FL 32127

DO NOT WRITE IN THIS SPACE

05022005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3250807	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALASTRA, ANTHONY J
545 VIRGINIA AVENUE
PORT ORANGE, FL 32127

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 _[signature]_ Pres.   5-2-05

Signature, typed or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.   OFFICERS AND DIRECTORS

TITLE	PST
NAME	ALASTRA, ANTHONY J
STREET ADDRESS	842 WILDWOOD CIRCLE
CITY-ST-ZIP	PORT ORANGE, FL 32127

TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

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05/05/05-80027-018 150.00

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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: _Anthony J. Alastra_ Pres.   5-2-05   386-788-9185

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