FILE NOW: FILING FEE AFTER MAY 1 IS $xxx.xx

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY 10 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000050367 (9)

1. Corporation Name
SUSAN S. TESINI, M.D. P.A.

Principal Place of Business
P.O. BOX 2961
MIAMI FL 33101

Mailing Address
P.O. BOX 2961
MIAMI FL 33101

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified: 07/01/1994
3a. Date of last filed report:
4. FEI Number: 65-0509604
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 F.S. Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
2a. Mailing Address
21 / 26
Suite, Apt. #, etc.
22 / 27
City & State
23 / 28
Zip / Country
24 / 25 / 29 / 30

9. Name and Address of Current Registered Agent

WYNNE, SUSAN
555 N.E. 15TH STREET
SUITE 31-I
MIAMI FL 33132

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 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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	TESINI, SUSAN S M.D.
STREET ADDRESS	590 SABAL PALM ROAD
CITY-ST-ZIP	MIAMI FL 33137
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 INFO

1 TITLE		☐ Change ☐ Addition
1 NAME		
1 STREET ADDRESS		
1 CITY-ST-ZIP		
2 TITLE		☐ Change ☐ Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE		☐ Change ☐ Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE		☐ Change ☐ Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		☐ Change ☐ Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		☐ Change ☐ Addition
6 NAME		
6 STREET ADDRESS		
6 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 119.07(3)(a), 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 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 on an attachment with an address.

SIGNATURE: Susan MD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-3-95
Date

0422645 FP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

DOCUMENT # P94000050713 (4)

1.

ENVIRO HOT PRESSURE WASHING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7231 RADIO RD
SUITE 103
NAPLES FL 33942

7231 RADIO RD.
SUITE 103
NAPLES FL 33942

3. 06/27/1994

3a.

4. 65 0504015

Applied For

Not Applicable

5. [ ] $8.75 Additional Fee Required

6. [ ] $5.00 May Be Added to Fees

8. [ ] Yes [✓] No

2 | 21 | 22 | 23 | 24 | 25

2a | 26 | 27 | 28 | 29 | 30

9. Name and Address of Current Registered Agent

FRANKLIN, NEIL
7231 RADIO RD.
SUITE 103
NAPLES FL 33942

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.

SIGNATURE

12.

	D
NAME	FRANKLIN, NEIL
	5331 2ND AVE. SW
	NAPLES FL 33999
	D
NAME	FRANKLIN, VANESSA H
	5331 2ND AVE. SW
	NAPLES FL 33999
	D
NAME	DACK, ROGER M
	214 MILLFIELD RD.
	LONDON, ENGLAND

13.

[ ] Change [ ] Addition

14.

SIGNATURE: NEIL FRANKLIN 5/9/95 813 352 7172

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0328294 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED

DOCUMENT # P94000050817 (3)

1. Corporate Name

SOEST ENTERPRISES, INC.

Principal Place of Business	Mailing Address
6768 MAUNA LOA BLVD SARASOTA FL 34241	6768 MAUNA LOA BLVD SARASOTA FL 34241

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/20/1994

3a. Date of Last Report

4. FEI Number: 65-0512003 ☐ 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

2. Principal Place of Business / 2a. Mailing Address: 21, 26, Suite, Apt. # etc. 22, 27, City & State 23, 28, Zip 24, 29, Country 25, 30

9. Name and Address of Current Registered Agent

CARON, ROGER J
1819 MAIN STREET
STE. 400
SARASOTA FL 34236

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 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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SOEST, MICHAEL C
STREET ADDRESS	6768 MAUNA LOA BLVD.
CITY-ST-ZIP	SARASOTA FL 34241
TITLE	D
NAME	SOEST, JULIE A
STREET ADDRESS	6768 MAUNA LOA BLVD.
CITY-ST-ZIP	SARASOTA FL 34241

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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 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 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 on an attachment with an address.

SIGNATURE: Michael C. Soest MICHAEL C. SOEST — May 9, 1995 — (813) 378-3437

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0340789 CP