

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000052995 (5)

1. Corporation Name

AMERICAN EARTH FRIENDLY, INC.



Principal Place of Business

542 S.E. 5TH AVE.
DELRAY BEACH FL 33483

Mailing Address

542 S.E. 5TH AVE.
DELRAY BEACH FL 33483

3. Date Incorporated or Qualified

07/18/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 1450 S.W. 10TH ST.

26 1450 S.W. 10TH ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #2 BLDG. B

27 #2 BLDG. B

City & State

City & State

23 DELRAY BEACH, FL.

28 DELRAY BEACH, FL.

Zip

Country

Zip

Country

24 33444

25 U.S.A.

29 33444

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAZLETT, WILLIAM L.
21610 GUADALAJARA AVE.
BOCA RATON FL 33433

81 Name

SAME

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

21610 GUADALAJARA AVE.

83

SAME

84 City

SAME

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 WILLIAM L. HAZLETT

William L. Hazlett

4/26/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DVS	<input checked="" type="checkbox"/> DELETE
NAME	BARNES, C. ROGER	
STREET ADDRESS	542 S.E. 5TH AVE.	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	DPT	<input type="checkbox"/> DELETE
NAME	HAZLETT, WILLIAM L	
STREET ADDRESS	542 S.E. 5TH AVE.	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	CHRUICKSHANK, JAMES A	
STREET ADDRESS	542 S.E. 5TH AVE.	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	HAZLETT, MICHAEL J	
STREET ADDRESS	3121 PIERSON DR	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	HAZLETT, JOAN M	
STREET ADDRESS	1450 S.W. 10TH ST. #2 BLDG. B	
CITY-ST-ZIP	DELRAY BEACH, FL. 33444	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	HAZLETT, WILLIAM L.	
2.3 STREET ADDRESS	1450 S.W. 10TH ST. #2 BLDG. B	
2.4 CITY-ST-ZIP	DELRAY BEACH, FL. 33444	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	HAZLETT, MICHAEL J.	
4.3 STREET ADDRESS	1450 S.W. 10TH ST. #2 BLDG. B	
4.4 CITY-ST-ZIP	DELRAY BEACH, FL. 33444	
5.1 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	HAZLETT, JOAN M.	
5.3 STREET ADDRESS	1450 S.W. 10TH ST. #2 BLDG. B	
5.4 CITY-ST-ZIP	DELRAY BEACH, FL. 33444	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 119.07(3)(k), 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: William L. Hazlett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM L. HAZLETT 4/26/96 (407) 276-4152

CR2E034 (12/95)