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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

P94000057495 (1)

GREEN TEAM ENTERPHISE	:S, INC:	
Principal Place of Business	Mailing Address	_
257 S.W. 6TH STREET BOCA RATON FL 33432	257 S.W. 6TH STREET BOCA RATON FL 33432	



Principal Place of Business Mailing Address					••••••						
		257 S.W. 6TH STREET BOCA RATON FL 3343									
						 Date Incorporated or Qualified 08/04/1994 	3a. Date of 05/3		, ,		
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number	1	·	Applied For		
21		26	26			65-0507487			Not Applicable		
Suite, Apt. #	t, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired	\$		Additional		
City & State			Chail State						Required		
23		28	City & State			6. Election Campaign Financing Trust Fund Contribution					
Zip	Country	Zip)				B. This corporation has liability for intangible tax under s 199.032,					
24	25	29	30								
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	legistered Age	nt			
				81	Name				j		
WELZ, A			•	82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)				
	. 6TH STREET Aton Fl 33432		-	83							
BOUA II	NION FL 33432										
				84	City		FI ^{[8}	5 Z ₁	o Code		
or registere familiar witi	o the provisions of Sections 607.050 ad agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authoriz	ed by the c	ve n	iamed corpo oration's bo	oration submits this statement for the pur and of directors. I hereby accept the app	pose of changi pintment as reg	ng its r istered	egistered office agent. I am		
SIGNATURE _	Signature, typed or printed harrie of registered ages		Of Registered	Agreti	l squatacine pe	nea when reinst things					
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND DI	RECTO	RS IN 12		
TITLE	PSD	☐ DELETE	DELETE 1 1 TII			☐ Change ☐ Āc					
NAME	WELZ, ANDY		1 2 NA								
STREET ADDRESS	257 S.W. 6TH STREET				ADDRESS						
CITY-ST-ZIP TITLE	BOCA RATON FL 33432 VTD	—	140		1 - 712			hanas	FT Addition		
NAME	ROGERS, JON S		DELETE 2 1 TI					nange	Addition		
STREET ADDRESS		S.W. 6TH STREET 23		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP							
CITY-ST-ZIP	BOCA RATON FL 33432										
TITLE	BOOK IMION IE 00402	DELETE	3 1 Ti		1 - 71:-			hanoe	Addition		
NAME	. 32 N					L ·					
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			3 4 617		İ						
TITLE							П	hange	Addition		
NAME			4 2 NA	ME			_		_		
STREET ADDRESS			4 3 STI	REET	ADDRESS				•		
CITY - ST - ZIP			4 4 CIT	Y-S	r ZiP						
TITLE		DELETE						hange	☐ Addition		
NAME			5 2 NA	ΜĒ							
STREET ADDRESS			53511	REET	ADDRESS						
CITY - ST - ZIP			5.4 Cri	Y-S	I - ZIP						
THILE		DELETE	6 1 (1)	TLE.				hange	☐ Addition		
NAME			6 2 NA	MF.							
STREET ADDRESS			6351	4661	ADDRESS						
CITY - ST - ZIP			6.4 C/1	Y · S	1 - ŽIP						

4. 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 trusted 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 andress.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STORE TO THE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STORE TO THE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STORE TO THE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STORE TO THE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STORE TO THE SIGNATURE AND TYPED OR THE SIGNATURE AND THE SIGNATUR