

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000057495 (1)

1. Corporation Name

GREEN TEAM ENTERPRISES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
257 S.W. 6TH STREET BOCA RATON FL 33432	257 S.W. 6TH STREET BOCA RATON FL 33432

2. Principal Place of Business	2a. Mailing Address
21 4260 NW 1st Ave Suite, Apt. #, etc.	26 SAME Suite, Apt. #, etc.
22 St 54 City & State	27 City & State
23 Boca Raton, FL Zip	28 Zip
24 33431 Country	29 USA Country

3. Date Incorporated or Qualified
08/04/1994
4. FEI Number
65-0507487
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
ROGERS, JON 257 S.W. 6TH ST BOCA RATON FL 33432

10. Name and Address of New Registered Agent
81 Name Rogers, Jon S
82 Street Address (P.O. Box Number is Not Acceptable) 4260 NW 1st Ave #54
83 Suite #54
84 City Boca Raton FL 85 Zip Code 33431

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	P	<input type="checkbox"/> DELETE
NAME	ROGERS, JON S	
STREET ADDRESS	257 S.W. 6TH ST	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	ROGERS, JON S	
STREET ADDRESS	257 S.W. 6TH STREET	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PHINNEY, MARK	
STREET ADDRESS	257 S.W. 6TH ST	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	Pres.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Welz, Andrew J.	
1.3 STREET ADDRESS	4260 NW 1st Ave #54	
1.4 CITY-ST-ZIP	Boca Raton, FL 33431	
2.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Rogers, Jon S	
2.3 STREET ADDRESS	4260 NW 1st Ave #54	
2.4 CITY-ST-ZIP	Boca Raton, FL 33431	
3.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Mark Phinney	
3.3 STREET ADDRESS	4260 NW 1st Ave #54	
3.4 CITY-ST-ZIP	Boca Raton, FL 33431	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
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 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 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:

CR2E034 (10/97)