

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90703 001 ***158.75

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DOCUMENT #	P94000059826
1. Entity Name HYDRO-ENVIRONMENTAL ASSOCIATES, INC.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10014 N. Dale Mabry Hwy.	3. Mailing Address 10014 N. Dale Mabry Hwy.
Suite, Apt. #, etc. Suite 205	Suite, Apt. #, etc. Suite 205
City & State Tampa, FL	City & State Tampa, FL
Zip 33618	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 59-3263891		Applied For ☐
			Not Applicable ☐
	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
Name Weinstein, David B.			
Street Address (P.O. Box Number is Not Acceptable) Bates Weinstein			
625 E. Twiggs Street, Suite 100			
City Tampa		FL	Zip Code 33602

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.	
SIGNATURE 	Weinstein, David B. 1 April 2002

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	January 1 - May 1 Fee is \$150.00 After May 1: Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Brown, Carl R.L. 10014 N. Dale Mabry Hwy. #205 Tampa, FL 33618	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Jones, Kenneth C. 10014 N. Dale Mabry Hwy. #205 Tampa, FL 33618	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Jones, Julia A. 10014 N. Dale Mabry Hwy. #205 Tampa, FL 33618	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Decamp-Brown, Jan 10014 N. Dale Mabry Hwy. #205 Tampa, FL 33618	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or on an attachment with an address, with all other information provided.		
SIGNATURE:	Brown, Carl R.L.	4/3/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date
		Daytime Phone #

CR2034B (12/01)