

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000073566 (9)

1. Corporation Name

PUMA ENVIRONMENTAL, INC.

Principal Place of Business

1300 BAYVIEW DRIVE  
TH-BR  
FORT LAUDERDALE FL 33304  
US

Mailing Address

1300 BAYVIEW DRIVE  
TH-BR  
FORT LAUDERDALE FL 33304  
US



3. Date Incorporated or Qualified

10/03/1994

3a. Date of Last Report

08/10/1995

4. FEI Number

65-0596278

APPLIED FOR

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 4015 SW 15 STREET

26 4015 SW 15 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 APT D103

27 APT. D. 103

City & State

City & State

23 Pompano Beach, FL

28 Pompano Beach, FL

Zip

Zip

Country

Country

24 33069

25 USA

29 33069

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEILER, JOHN P ESQ.  
2900 EAST OAKLAND PARK BOULEVARD  
SUITE 200  
FORT LAUDERDALE FL 33306

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

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 ☐ DELETE

NAME  
KOSTOFF, MICHAEL G  
STREET ADDRESS  
1300 BAYVIEW DRIVE, TOWNHOUSE BR  
CITY-ST-ZIP  
FORT LAUDERDALE FL 33304

TITLE ☐ DELETE

NAME  
KOSTOFF, MICHAEL G  
STREET ADDRESS  
1300 BAYVIEW DRIVE, TOWNHOUSE BR  
CITY-ST-ZIP  
FORT LAUDERDALE FL 33304

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

4015 SW 15 STREET APT D103  
POMPANO BEACH, FL 33069

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

4015 SW 15 STREET APT D103  
POMPANO BEACH, FL 33069

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 this address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

754 977 6408  
954-898-2705