

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

APPROVED
AND
FILED

1997 MAY -1 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000079334 (6)

1. Corporation Name

ENVIRONMENTAL EQUIPMENT & CONSTRUCTION, INC.

Principal Place of Business

P.O. BOX 18806
SUITE 302
TAMPA FL 33670-8806
US

Mailing Address

P.O. BOX 18806
SUITE 302
TAMPA FL 33670-8806
US

2. Principal Place of Business

21 737 PINELLAS BAYWAY

Suite, Apt. #, etc.

22 SUITE 302

City & State

23 TIERRA VERDE FL

Zip

24 33715

Country

25 US

2a. Mailing Address

26 737 PINELLAS BAYWAY

Suite, Apt. #, etc.

27 SUITE 302

City & State

28 TIERRA VERDE FL

Zip

29 33715

Country

30 US

9. Name and Address of Current Registered Agent

FORD, PETER J
737 PINELLAS BAYWAY
SUITE 302
TIERRA VERDE FL 33715

3. Date Incorporated or Qualified

10/28/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3163314

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

800002164578--5

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***173.75 ***173.75

FL

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 DP ☐ DELETE

NAME RICHMAN, MARC
STREET ADDRESS 5037 WESLEY DR
CITY-ST-ZIP TAMPA FL

TITLE ~~DST~~ ☐ DELETE

NAME FORD, PETER J
STREET ADDRESS 737 PINELLAS BAYWAY, SUITE 302
CITY-ST-ZIP TIERRA VERDE FL 33715

TITLE C ☐ DELETE

NAME JAMES YOUNG
STREET ADDRESS 4450 GOLF BLVD, SUITE 501
CITY-ST-ZIP ST. PETERSBURG FL

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

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

2268 KINGS POINT DRIVE
LARGO FL 33774

14. I do 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:

PETER J FORD

4/29/97

(813) 866-944

Date

Daytime Phone #

CR2E034 (9/96)