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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000084245 (7)

**ENVIROTEC CHEMICALS LINC.** 

2500 N. 38TH AVE 2500				500 N. 38TH AVE OLLYWOOD FL 33021-3001		3. Date Incorporated or Qualified 3a. Date of Last Report			
						<ol> <li>Date Incorporated or Qualified</li> <li>11/17/1994</li> </ol>	06/13/		eport
	lace of Business		2s. Mailing Address			4. FEI Number			plied For
1 Suite, Apt. #. etc. 2			26			65-0534006		Not Applicabl \$8.75 Additional	
		· · · · · · · · · · · · · · · · · · ·				5. Certificate of Status Desired Fee Required			·
City & Star 3	te		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 to Added to	
Z <sub>1</sub> p	Count	'y	Zip	Cou	ntry	8. This corporation has liability for			
4	25		29	30	······································	Florida Statutes	Yes D		
MAC	<ol> <li>Name and Address</li> <li>NER, DAVID</li> </ol>	ess of Current F	Registered Agent		81 Name	10. Name and Address of New I	Registered Age	ent	
	Z-LAKENOOD LN				_	Inna (D.O. Day Mumbar in Nat Appeal	labla)		
HO	LYWOOD FL 33021				Street Add	ress (P.O. Box Number is Not Accept	(adie) IUE		
				}	83				,
					84 City		<b></b>	35 Zip C	Code
11. Pursuant	to the provisions of Sec	tions 607 0502 a	and 607 1508 Florida S	Statutes the ab	ove-named con	poration submits this statement for the	FL Purpose of ch	anning its	registere
	registered agent, or bot	h, in the State of	Florida Such change	was authorized	by the corpora	poration submits this statement for the ation's board of directors. I hereby acc	cept the appoint	tment as	registered
office of abent 1 :	an family with and ac	reof the obligation	ans of Section buy (ISD					_	
			1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			4114/9	97	
SIGNATURE	Signature, typed or printed name	e of real stered agent a	and Ittle if applicable	(NOTE: Registered		ured when reinstating)	4/4/ DATE	97	
SIGNATURE	Signature, typed or printed name		and title if applicable	(NOTE: Registered	Agent signature requ		DATE FICERS AND DI	7 RECTOR	
SIGNATURE 12.	Signature, typical or printed nam	e of real stered agent a	and Ittle if applicable	(NOTE: Registered 13.	Agent signature requ	ured when reinstating)	DATE FICERS AND DI	97	
SIGNATURE I <b>2.</b> THE	Signature, typed or printed name	ic of rely stered agent a DEFICERS AND D	and title if applicable	(NOTE: Registered 13. E 1.1 Til 1.2 NA	Agent signature requ	ured when reinstating)	DATE FICERS AND DI	7 RECTOR	
BIGNATURE  12.  THE  THEET ADDRESS	Signature, typical or primed name  D  KASNER, DAVID	ic of rely stered agent a DEFICERS AND D	and title if applicable	(NOTE Registered 13. E 1.1 Til 1.2 NA 1.3 ST	Agent signature required to the signature requirement of the signature req	ured when reinstating)	DATE FICERS AND DI	7 RECTOR	
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//4/91 (954) 983-825-

**FILED** 

Apr 18 1997 8:00am

Secretary of State