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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-SI-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000055809 (4)

THE HAZARDOUS MATERIALS SPECIALIST INC.

Principal Place	o of Business	Mailing Address							
2909 OAK PARK CIRCLE		2809 OAK PARK CIRCLE							
DAVIE FL 33328		DAVIE FL 33328-6726							
					3. Date Incor	orated or Qualified	3a. Date of Las	st Report	
					07/19/19		03/05/199	6	
a	ace of Business	2a. Mailing Address			4. FEI Numbe			Applied For	
Suite, Apt	. UNIVERSITY DC.	26 57ME Suite, Apt. #, etc.			NOL A	PPLICABLE	60.7	Not Applicable	
22 £	#, GIC.	30πe, Αρτ. #, διο.			5. Certificate	of Status Desired		5 Additional Required	
City & State	1	Crty & State			6. Election Ce	mpalgn Financing		DO May Be	
23 FLAN	THINON FC.	28				Contribution		ed to Fees	
7 _{(P})	Country	Zip Country			8. This corpor	8. This corporation has liability for intangible tax under s. 199.032,			
<u>333</u>		I .I Li	ю]		Florida Sta		Yes No		
501	9. Name and Address of Current F	registered Agent	81	Name		Address of New Re			
DOMANICO, EDWARD J				, , , , ,		T. DomAN			
2809 OAK PARK CIRCLE DAVIE FL 33328				Street Ac	ress (P.O. Box Number is Not Acceptable) 30 S- UNIVERSITY DR. SUITEF.				
DAT	IL 1 E 33320		83		<u>, jo 0- 0</u> ,	VIVE D	<u>~, 00//(</u>		
			84				leel 5	in Carla	
			84	City	PUNTATT.	aN	FL * 5	Cip 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 register office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I bereby accept the appointment as register								g its registered	
agent I am fam-liar with, and accept the obligations of, Section 607.0505, Florida Statutes.						() acce	or the appointment	as registered	
SIGNATURE	EDWARD U.	DOMANCO 1		SERT.	alleol	Jananno	. 2/5/	9	
12.	Stgrinting, typed or printed name of registered agent a OFFICERS AND I		Registered Ag	ent signature re	equired when reinstating) ADDITIONS	CHANGES TO OFFIC	DATE / /	ORS IN 12	
THE	P	DELETE	1.1 TITLE		- Ghi		Chang		
NAME	DOMANICO, EDWARD J		1.2 NAME	/	o			·	
STREET ADDRESS	2809 OAK PARK CIRCLE		1.3 STREE	TADDRESS .	· 1	* .			
City ST-ZIP	DAVIE FL 33328		1.4 CITY-	ST-ZIP	\$ = 1				
TITLE		☐ DELETE	2.1 TITLE				☐ Chang	ge Addition	
NAME			2.2 NAME					ł	
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THE		DELETE	4.1 TITLE	U, ED			☐ Chang	ge Addition	
NAME			4. 2 NAME						
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C(11Y+S(1+Z)):			4.4 CITY -	ST-ZIP					
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CITY-SI-ZIF		DELETE	5.4 CITY -	ST-ZIP	······································				
TITLE		☐ DELETE	6.1 TITLE				Chan	ge Addition	
NAME SIBEELADORESS			6.2 NAME	T ADDRESS				İ	
T department and the second			E U.J JINEE	เกษษาย้องไ					

6.4 CHTY-ST-ZIP

14. I do hereby certily 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.