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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000007698 (9)

FILED Jan 29 1998 8:00am Secretary of State

SAFEHOME ENVIRONMENTAL SERVICES, INC.							
}							
Principal Place of Business Mailing Address						ili i gala e liti a i	12101 IDII IDEI
817 DUNDEE DR. 817 DUNDEE DR.							
WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	0. 70.	
					01/22/1996		
	Place of Business	2a. Mailing Address	368		4. FEI Number	IA	Applied For
21 2819 WINDHAM DR. 26 V.O. BOX 30 Suite, Apt. #, etc. Suite, Apt. #, etc.					59-3372049		Vot Applicable
22 EUSTIS, FL 27					5. Certificate of Status Desired		Additional Required
City & Stat	TIS, FL	City & State 28 MOUNT DON	A F	<u>Z</u>	Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees
Zip 24 327	26 25 V.S.	29 3 2756-03683	Country 50	US.	This corporation owes or has paid the cu Personal Property Tax due June 30.		ntangible No
	Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
	NNA, RICHARD M		81	Name			
817 DUNDEE DR WINTER SPRGS FL 32708				Street Ad	dress (P.O. Box Number is Not Acceptable)		
AAI	MIER SPRGS PL 32/08		83				
			84	City		85 Zip	Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above	-named co	FL	e changing	ite registered
office or r	registered agent, or both, in the State of	of Florida, Such change was aut	thorized by	the corpor	orporation submits this statement for the purpose or ration's board of directors. I hereby accept the app	oointment a	s registered
SIGNATURE	12 In. 6	Le	da Otardies		1-21-	98	
	Signature, typed or printed name of registered agen		Registered Age	nt signature req	quired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	,	
TITLE NAME	HANNA, RICHARD M	☐ DELETE	1.1 TITLE			☐ Change	Addition
STREET ADDRESS	047 DUNDEE DD		1.2 NAME	ADDRESS			
CITY-ST-ZIP	WINTER CODINCE EL DOZOG		1.3 STREET				ļ
TITLE			1.4 CITY - ST 2.1 TITLE	-218		Change	Addition
NAME	- · · · · · · · · · · · · · · · · · · ·		2.2 NAME	ĺ	. •		
STREET ADDRESS			2.3 STREET ADDRESS				ļ
CITY-ST-ZIP	2.4		2. 4 CITY - S	ſ-ZIP			
TITLE	DELETE 3.1		3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET /	ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST	- ZIP			
TITLE		☐ DELETE	4.1 TITLE			L Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET /	IDDRESS			
CITY-ST-ZIP		L OCI ETC	4.4 CITY - ST	- ZiP			
TITLE		DELETE	5.1 TITLE			L Change	Addition
NAME OTDEET ADDRESS			5.2 NAME				
STREET ADDRESS			5.3 STREET A				
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY-ST	- ZIP		T Chance	A chalition
		T refere	6.1 TITLE			☐ Change	Addition
NAME STREET ADORESS			6.2 NAME	INDRECO			
CITY-ST-ZIP			6.3 STREET A				

14. I 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.