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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000010698 (4)

NATIONAL ENVIRONMENTAL TRAINING INSTITUTE, INC.

FILED Mar 10 1998 8:00am Secretary of State

21 22 Suite, Apt. 22 City & State 23 SEFFA	IA DRIVE #B 33584 Jace of Business S. KINGSWAY RD #, etc FL VER FL Country	Suite, Apt. #, etc. 27 City & State 28	KINGSWAY RD.	DO NOT WRITE IN TH 3. Date Incorporated or Qualified 01/31/1996 4. FEI Number 59-3357888 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent 10. EISH STEPHEN & 81 Name 550				S. KINGSWAY RD	
office or re agent. I at	to the provisions of Sections 607,050, egistered agent, or both, in the State of Indian Medical accept the obligation of State of Indian Medical Accept the obligation of Fict RS AND PERSON, STEPHEN 11516-B VALENCIA DR	of Florida, Such change was attors of, Section 607,0505, f	utes, the above-named cornu	oration submits this statement for the purpos on's board of directors. I hereby accept the i	e of changing its registered appointment as registered
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SEFFNER FL	DELETE	1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIFLE		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ DELETÉ	4.4 CI3Y-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	sertify that the information supplied w	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP / for the exemption stated in S	Section 119.07(3)(i), Florida Statules. I furthe	Change Addition

indicated on this annual report or supplies with this limit does not quality for the exemption stated in Section 119,07(3)(f), Fibrida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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.

(813)662-5552