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

Jun 18 1998 8:00am **PROFIT** FLORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P96000049024 (8) DOCUMENT # JRT ENVIRONMENTAL SOLUTIONS, INC. Principal Place of Business Mailing Address 123 HOLTZ DRIVE 123 HOLTZ DRIVE CASSELBERRY FL 32707 CASSELBERRY FL 32707 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/06/1996 2. Principal Place of Business 2a. Mailing Address Applied For 1339-165 BENNETT DR. 26 59-3384708 Not Applicable \$8.75 Additional 5. Certificate of Status Desired LONGWOOD Fee Required \$5.00 May Be City & State 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered A 10. Name and Address of New Registered Agent SIMMONS, CLAYTON D 81 Name 200 W. FIRST ST., STE. 22 82 Street Address (P.O. Box Number is Not Acceptable) SANFORD FL 32771 63 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607-1508, Florida Statules, 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pool dinament is gestered agent and tilled applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change PICHALD TAYLOR, JOHN R NAME 1.2 NAME 123 HOLTZ DRIVE STREET ADDRESS 1.3 STREET ADDRESS CASSELBERRY FL 32707 1.4 CHTY - ST - ZIP CITY-ST-ZIP DELFTE Addition TITLE 2.1 TITLE TAYLOR, RICHARD J. 1339-165BENNETT DR. NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-7IP L. DELETE TITLE 3 1 11TLF 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. C(1Y-S1-Z)P TITLE DELETE 4.1 THLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 C/TY - ST - ZIP 14. Thereby 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 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.