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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000075765

AMBI, INC.

## **FILED** Feb 01, 1999 8:00am **Secretary of State**

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Principal Place	of Business	Mailing Address				II 18 881 8114 16848 1	
1628 N. 3RD S1		1628 N. 3RD STREET					•
JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32				50			
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					3. Date Incorporated or Qualifed		1
	·		. ,		09/09/1996		liad Ear
Principal Place of Business     Za. Mailing Address					4. FEI Number	<u> </u>	olied For
21		26			59-3399087	<del></del>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Re	I
22		27					·
- City & State	8	- City & State -			6. Election Campaign Financing	· \$5:00·1	
23	·	28			Trust Fund Contribution	Added to	rees
Zip	Country .	Zip	Cour	try	8. This corporation owes the current year I		□No
24	_  25	29	30		Personal Property Tax.  10. Name and Address of New Registered		
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registere	u Agent	
DATE	EL SONAL C				·		
PATEL, SONAL C				82 Street Add	dress (P.O. Box Number is Not Acceptable)		
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11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Stat	utes, the ab	ove-named cor by the corporat	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the app	or changing its ointment as reg	gistered
onice or n	m familiar with, and accept the objigation	ons of, Section 607.0505, F	lorida Statu	les.	1116 6	C	Ì
SIGNATURE	Sepatel				1/19/9	7:	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re			TF: Registered	gent signature requi	red when reinstating) DATE		
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12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
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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, with all other like empowered.

SIGNATURE: