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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name P96000082916 (3)

ENVIROSAFE PRODUCTS, INC.

Principal Place of Business Mailing Address 15515 NW 83RD AVE 15515 NW 83RD AVE MAM FL 33016 MIAMI FL 33016

## **FILED** May 12 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0729359 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 6. This corporation owes or has paid the current year Intangible 24 25 29 30 ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MCCALL, JOHN P 15515 NW 83RD AVE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33016** 83 84 City Zip 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change Addition MCCALL, JOHN P NAME 1.2 NAME 15515 NW 83RD AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33016 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition MCCALL CHRISTOPHER K NAME 2.2 NAME 15515 NW 83RD AVE STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33016 CITY-ST-21P 2 4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3 1 TITLE MCCALL, SHEILA A NALÆ 3.2 NAME 7105 MIAMI LAKES DR, SUITE N-15 STREET ADDRESS 3.3 STREET ADDRESS MIAMI LAKES FL 33014 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Addition 4.1 THILE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ... Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET AOORESS City-St-2#

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, an on an attachment with an address.

SIGNATURE:

flu Pmeball

JOHN P. MCCALL 4/27/08 305-558-7072