

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

FILED
Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000102826 (0)**
1. Corporation Name
ECOGROUP INTERNATIONAL CORPORATION



Principal Place of Business
**13820 GOLF COURSE ROAD
PARRISH FL 3429**

Mailing Address
**POST OFFICE BOX 792
PARRISH FL 34219**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/23/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0724088	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent WALTERS, CLIFFORD L 802 11TH ST. WEST BRADENTON FL 34205				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 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		Signature (Type or print name of registered agent and title, if applicable)		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE	1.1 TITLE	P/CEO/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BUNDY, OTTO M		1.2 NAME	BUNDY, OTTO M.			
STREET ADDRESS	4812 18TH AVE WEST		1.3 STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-ZIP				
TITLE	EVP	<input type="checkbox"/> DELETE	2.1 TITLE	EVP/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BUNDY, MICHAEL M		2.2 NAME	BUNDY, MICHAEL M.			
STREET ADDRESS	5508 78TH AVE EAST		2.3 STREET ADDRESS				
CITY-ST-ZIP	PALMETTO FL 34221		2.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE	V/D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME			3.2 NAME	OTTO S. BUNDY			
STREET ADDRESS			3.3 STREET ADDRESS	1308 E Poinsettia Ave.			
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Tampa, FL 33612			
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	T	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME			4.2 NAME	BUNDY, PATRICIA ANN			
STREET ADDRESS			4.3 STREET ADDRESS	4812 18th Ave. W.			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	BRADENTON, FL 34205			
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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***450.00

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.

SIGNATURE: *OTTO M. Bundy* 2/12/98 10:41:17 AM

CR2E034 (10/97)