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Mar 20 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morone  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000102996 (1)  
1. Corporation Name  
ALL-AMERICAN ENVIRONMENTAL SERVICES INC.



Principal Place of Business: 2560 SAINT ANTHONY'S STREET TITUSVILLE FL 32780-6755  
Mailing Address: 2560 SAINT ANTHONY'S STREET TITUSVILLE FL 32780-6755

3. Date Incorporated or Qualified: 12/19/1996  
3a. Date of Last Report: 12/19/1996  
4. FEI Number: 59-3416173  
Applied For: Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business  
21 State, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
25 Country  
26 Mailing Address  
27 City & State  
28 Zip  
29 Country  
30 Country

9. Name and Address of Current Registered Agent  
KERESTESSY, ARTHUR  
2560 SAINT ANTHONY'S STREET  
TITUSVILLE FL 32780-6755

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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: *Arthur Kerestessy* DATE: 3-10-97

12. OFFICERS AND DIRECTORS  
1.1 TITLE: D  
1.2 NAME: KERESTESSY, ARTHUR  
1.3 STREET ADDRESS: 2560 SAINT ANTHONY'S ST.  
1.4 CITY-ST-ZIP: TITUSVILLE FL 32780  
2.1 TITLE: D  
2.2 NAME: PETERSEN, BRUCE  
2.3 STREET ADDRESS: 1925 SE BUTTONWOOD DRIVE  
2.4 CITY-ST-ZIP: PORT ST LUCIE FL 34952  
3.1 TITLE: D  
3.2 NAME: [Blank]  
3.3 STREET ADDRESS: [Blank]  
3.4 CITY-ST-ZIP: [Blank]  
4.1 TITLE: D  
4.2 NAME: [Blank]  
4.3 STREET ADDRESS: [Blank]  
4.4 CITY-ST-ZIP: [Blank]  
5.1 TITLE: D  
5.2 NAME: [Blank]  
5.3 STREET ADDRESS: [Blank]  
5.4 CITY-ST-ZIP: [Blank]  
6.1 TITLE: D  
6.2 NAME: [Blank]  
6.3 STREET ADDRESS: [Blank]  
6.4 CITY-ST-ZIP: [Blank]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE:  Change  Addition  
1.2 NAME:  Change  Addition  
1.3 STREET ADDRESS:  Change  Addition  
1.4 CITY-ST-ZIP:  Change  Addition  
2.1 TITLE:  Change  Addition  
2.2 NAME:  Change  Addition  
2.3 STREET ADDRESS:  Change  Addition  
2.4 CITY-ST-ZIP:  Change  Addition  
3.1 TITLE:  Change  Addition  
3.2 NAME:  Change  Addition  
3.3 STREET ADDRESS:  Change  Addition  
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4.4 CITY-ST-ZIP:  Change  Addition  
5.1 TITLE:  Change  Addition  
5.2 NAME:  Change  Addition  
5.3 STREET ADDRESS:  Change  Addition  
5.4 CITY-ST-ZIP:  Change  Addition  
6.1 TITLE:  Change  Addition  
6.2 NAME:  Change  Addition  
6.3 STREET ADDRESS:  Change  Addition  
6.4 CITY-ST-ZIP:  Change  Addition

14. I do 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: \* *Arthur Kerestessy* DATE: 3-10-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)