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 P97000019279 (3)

ENVIRO-SAFE SYSTEMS, INC.

Principal Place of Business

Mailing Address

FILED Feb 27 1998 8:00am Secretary of State



2264 LAKE FRANCIS DR. APOPKA FL 32712			2264 LAKE FRANCIS DR. APOPKA FL 32712					
,					DO NOT WRITE IN THI	3 SPACE		_
					3. Date Incorporated or Qualified			1
9 Principal D	lace of Business				03/03/1997			1
Ь '	Tace of Business	 	2a. Mailing Address		EIN 59-342640	, = +	Applied For	4
Suite, Apt. #, etc.		26 Suito Apt #	Suite, Apt. #, etc.		LIN 07-242040		Vot Applicable	4
22		27	27		5. Certificate of Status Desired	•	Additional Required	
City & State	6	City & State	-		6. Election Campaign Financing Trust Fund Contribution		D May Be to Fees	Ì
Zip	Countr	<u> </u>	Co	untry	8. This corporation owes or has paid the c			1
24 25		29	30		Personal Property Tax due June 30.		□ No	1
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered	J Agent		1
CS	EAK, CARL A			81 Name	•			1
220	<mark>b4 läke francis</mark> d OPKA FL 32712	R.		82 Stree	t Address (P.O. Box Number is Not Acceptable)			┪
, AP	OPINA PL 321 12			83				4
•								ı
_				84 City	F	85 Zip	Code	1
.11. Pursuant	to the provisions of Sec	tions 607,0502 and 607,1508. Florid	da Statutes, the a	hove-name	d cornoration submits this statement for the nurnose	of changing	ite registered	4
office or r	egistered agent, or both	i, in the State of Florida. Such char cept the obligations of, Section 607.	ige was authorize	ed by the co	rporation's board of directors. I hereby accept the ap	pointment a	s registered	
	III IAIIBIIAI WIIII, AIIO ACC	epit the obligations of, Section 607.	0505, Florida Sia	110185.				
SIGNATURE	Signature, typed or printed name	e of registered agent and title if applicable	(NOTE: Registere	d Agent signatu	re required when reinstating) DATE			ر ا
12.		FFICERS AND DIRECTORS :	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	15
TITLE	D	☐ DE	LETE 1.1 T	ITLE		Change	Addition	13
NAME	CSEAK, CARL A		1.2 N	IAME				3
STREET ADDRESS	2264 LAKE FRAN	CIS DR.	1.3 \$	TREET ADDRESS				Ę
CITY-ST-ZIP	APOPKA FL 3271	2	1.4 0	SITY-ST-ZIP				Š
TITLE	D	☐ DE	LETE 2.1 T	ITLE		☐ Change	Addition	٦
NAME	CSEAK, RICHARD	1	2.2 N	IAME				ļ.
STREET ADDRESS	1913 PAULINE		2.3 \$	TREET ADDRESS				
CITY-ST-ZIP	BONNE TERRE M	O 63628	2.40	CITY - ST-ZIP				
TITLE	-	☐ DE	LETE 3.1 T	ITLE		Change	Addition	1
NAME			3.2 N	IAME				1
STREET ADORESS			3.3 S	treet address				1
CITY+ST-ZIP	· · · · · · · · · · · · · · · · · · ·			CITY-ST-ZIP				
TITLE		☐ DE	LETE 4.1 To	ITLE	""	Change	Addition	1
NAME			4.21	YAME				
STREET ADDRESS			4.3 \$	TREET ADDRESS				-
CITY-ST-ZIP			~~~	ITY-ST-ZIP				
TITLE		☐ DE	LETE 5.1 TI	ITLE		Change	Addition	
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	treet address				
CITY-ST-ZIP				ITY-ST-ZIP				
TITLE		☐ DÉ	LETÉ 6.1 TI	TLE		☐ Change	Addition	
NAME			6.2 N	AME				
STREET ADDRESS			6.3 \$	treet address				
CITY-ST-ZIP			6.4 CI	ITY-ST-ZIP				

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 by an attachment with an address.