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 # P97000019455 (9)

ENVIRO HYGIENDE PRODUCTS & SERVICES, INC.

FILED Mar 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				T 1801/904 HO 10/14 FOOTI OOMA BOMF OOMF OOMF HOUD 18/	EF BIEGI BEFBI EFFI FEBI	
269 ODOMS MILL BLVD PONTE VEDRA BEACH FL 32082 269 ODOMS MILL BLVD PONTE VEDRA BEACH FL				062 DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					03/03/1997	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26					59-3437962	Not Applicable
27					5. Certificate of Status Desired	8.75 Additional Fee Required
City & State					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country			try	8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
9, Name and Address of Current Registered Agent 81 Name					10. Name and Address of New Registered Age	ont
KIRWAN, MICHAEL B				81 Name STEVEN F. SIPKOUSKY		
50 N LAURA STREET				32 Street Addre	ess (P.O. Box Number is Not Acceptable)	
SUITE 2800					69 ODOMS MILL BLUD	
JAC	XK\$ONVILLE FL 32202		ľ	33		
					NTE VEDRA BEHEA	Zip Code 3208 2
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 agreent the obligations of, Section 607 0505, Florida Statutes.						
SIGNATURE 1	Steen I Asplus				1-20	-98
	signature, typed or printed rian of registered			Agent signature require		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DI	
TITLE	D	IX DELETE	1.1 TITL		لب ا	Change
NAME	SIPKOVSKY, MARYANN L		1.2 NAM			
STREET ADDRESS 269 ODOMS MILL BLVD				EET ADDRESS		
CITY-ST-ZIP	PONTE VEDRA BEACH FL			(-ST-ZIP		Change Addition
TITLE	_		2.1 TITL			Change
NAME	25.15, 2.15.15		2.2 NAM	i i		
STREET ADDRESS	269 ODOMS MILL BLVD	00000		EET ADDRESS		
CITY-ST-ZIP	PONTE VEDRA BEACH FL	32082		Y-ST-ZIP	4.001600.00	Change Addition
TITLE		□ Defert	3.1 TiTL			Change Addition
NAME OTREET ARRESSES			3.2 NAN	E	SCOTT A GREEN 53 BEAK PEN	
STREET ADDRESS				EET ADDRESS /	PONTE VERRA ACH, FL 32082	,
CITY-ST-ZIP TITLE		DELETE	3.4. C(I 4.1 T(T)	Y-ST-ZIP		Change Addition
		T Derrit			STEVEN F. SIPKOVSKY	Cutaine Per verolitori
NAME DESCRIPTION			4, 2 NA	oft Appendice	TEVELS F. STRAUSEY	
STREET ADDRESS				EET ADDRESS	269 DOOMS HILL BLUD PONTE VEDRA BCH, PL 3208	· · ·
CITY-ST-ZIP Title		DELET e	5.1 TITL		TONIE VEUICE DAT, PC 3550	Change Addition
NAME		C. DECENT	5.2 NAN		٥	- Automoti
- 1				EET ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITE	-ST-ZIP	П	Change Addition
NAME		_ occur	6.1 HTC			Average T vagority
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		I ST OF THE PERSON OF THE PERS	■ 6.4 CITY	-ST-ZIP	0 15 440 07/040 Ft 14: 01 14 14 14 14	1) 1 (1) 5 (1)

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 this 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 a statement with an address.