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 # P97000021485 (2)

ES&H PROFESSIONALS, INC.

FILED Feb 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								E NORMANDE HA KATIN (ABUN KATIN BANK BALIN ABUND NORM NURU ANDEN HOMES ATTIN SAND
27 HARBOR WOODS CIRCLE SAFETY HARBOR FL 34695				27 HARBOR WOODS CIRCLE SAFETY HARBOR FL 34695				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified
								03/12/1997
2. Principal P	Place of Busin	2a. Ma	2a. Mailing Address				4. FEI Number Applied For	
21	-:	26					59-3435211 Not Applicable	
Suite, Apt.		27	. 4				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & Stat	le 	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zıp		Country	Zır)	Col	intry	,	8. This corporation owes or has paid the current year Intangible
24		25	29		30			Personal Property Tax due June 30. Yes No
		and Address of Cur	ent Registere	d Agent				10. Name and Address of New Registered Agent
Ų ₩E	esner, bi	RENT				81	Name	•
	HARBOR V FETY HAR				B2	Street	t 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 agont, 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 agont. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
		, i. till bood, i ilo oli	ng.ii				•	
SIGNATURE	Signature, typed	or printed harne of registered	ageni and blic if aj p	olicable (NOT	E: Registere	d Age	int signature	re required when reinstaling) DATE
12.		OFFICERS /	AND DIRECTO	RS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE				DELETE	1.1 TITLE			P/T Change Addition
NAME					1.2 N	AME		Brent Weesner
STREET ADDRESS					1.3 S	TAEET	ADDRESS	27 Harbor Woods Cir.
CITY+ST-ZIP					1.4 C	ITY-S	1-ZIP	Safety Harbor - FL - 34695
TITLE	l			DELETE	2.1 T	TLE		V/S Change X Addition
NAME	ļ				2.2 N	AME		Donn Brown
STREET ADDRESS	Ì				2.3 S	TREET	ADDRESS	1375 Irving Ave.
CITY-ST-ZIP					2.40	ITY - S	ST-ZIP	Donn Brown 1375 Irving Ave. Clearwater -FL-34616
TITLE				DELETE	3.1 T	TLE		Change Addition
NAME					3 2 N	AME		
STREET ADDRESS					3.3 \$	TREET	ADDRESS	
CITY-ST-ZIP					3.4. 0	ITY-S	T-ZIP	
TITLE	Į			DELETE	4.1 (1	TLE		Change Addition
NAME					4.21	AME		
STREET ADDRESS					4.3 \$	TREET	ADDRESS	
CITY - ST - ZIP							T-ZIP	
TITLE				☐ DETELE	5.1 TI	TLE		☐ Change ☐ Addition
NAME	ļ				5.2 N	AME		
STREET ADDRESS	[5.3 S	REET	ADORESS	1
CITY-ST-ZIP	 						T-21P	
TITLE				DELETE	6 1 T	TLE		☐ Change ☐ Addition
NAME					6.2 N	AME		}
STREET ADDRESS					6.3 S	TARET	AODRESS	
0.74 02 30	I					A	T 710	

14. Thereby 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.

Brent Weesner

813-455-2255