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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000045917 (6)

A-1 ENVIRONMENTAL SERVICES, INC.

FILED Apr 28 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 28 INDUSTRIAL LOOP #176 P.O. BOX 975 **ORANGE PARK FL 32073 ORANGE PARK FL 32067-0975** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/23/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3449398 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country This corporation owes or has paid the current year Intangible 🔀 Yes 24 25 29 30 Personal Property Tax due June 30. □ No 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent SMITH, ELMER E 28 INDUSTRIAL LOOP #176 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE PARK FL 32073** 83 City Zip Code 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE 11 TIME TITLE ers SMITH, ELMER E NAME 1.2 NAME CR2E034 P.O. BOX 975 STREET ADDRESS 1.3 STREET ADDRESS **ORANGE PARK FL 32067-0975** CITY-ST-ZIP 1.4 City-St-7/P Change Addition DELETE 2.1 TITLE TITLE RES Elmet E. Smith NAME 2.2 NAME 8742 Bishopwood Dr. 2.3 STREET ADDRESS STREET ADDRESS Jacksonville, 41, 32244 Change CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 THEF NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME **53 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP CITY-ST-7IP

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.