FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT GORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700060818

ECO-OP, INC.

Principal Place of Business 696 NORTH MAITLAND AVE.

2. Principal Place of Business

MAITLAND FL 32751

Mailing Address

696 NORTH MAITLAND AVE. MAITLAND FL 32751

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90006 026 ***150.00



DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified

07/08/1997

21		za. Walling Address			}	4. FEI Number		A	pplied For
Suite, Ap	t # etc	26				<u>59-3458322</u>			ot Applicabl
22		Suite, Apt. #, etc.			İ	5. Certifcate of Status De	sired 🔲	\$8.75	Additional
City & Sta	ate	City & State			-+	& Election Consults 5:			Required
23		28				Election Campaign Fin Trust Fund Contribution			May Be
Zip ─	Country	Zip	Count	try		8. This corporation owes			to Fees
24	25	29	30			Personal Property Tax.	me content year if	ntangibie □Yes	□No
	9. Name and Address of Currer	it Registered Agent			1	0. Name and Address of	f New Registered		
DIN	8	81 Name CHRISTOPHER G. COGAN 82 Street Address (P.O. Box Number is Not Acceptable) 696 N, MAITLAND AVE							
696	-								
MAI	0								
IAIVI	ITLANÓ FL 32751.	8	83 _						
•				<i>20</i>					
	_			4 City	1417	LAND	FL		Code
11. Pursuant	to the provisions of Sections 607,850, registered agent or work in the State	2 and 607.1508, Florida Statute	s, the abo	ve-named	cornorati	OR Submits this statement	for the minutes	<u>- 32</u>	2757
agent. I a	registered agent or both in the State of the familiar with and agreet the oblight	of Florida. Such change was au	thorized b	y the corpo	oration's	board of directors. I hereb	y accept the appo	r cnanging its intment as re	registered aistered
SIGNATURE	to the provisions as Sections 607, 450. registered agent or both in the State arm familia, with, and aucept the oblight	CHRISTOP	ua siaiute 46 R	S. CC	06 <i>4</i> 1	}			J -
	Signature, typed or printed name of region agen	t and title if applicable. (NOTE: F	Registered A-	ent signature re	anulan-14	Today Area	1.5.	99	
12.	OFFICERS AN		13.	ent signature re	edureo wher		DATE		
TITLE	CTD	☐ DELETE	1.1 TITLE	-	10-	ADDITIONS/CHANGES	TO OFFICERS AF		
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CITY-ST-ZIP	MAITLAND FL 32751								
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STREET ADDRESS	696 NORTH MAITLAND AVE.		2.2 NAME						
			■ 2.3 STREE	TADDRESS					
-				- 1					
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officer or director of the corporation of 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 of changed of the corporation of the

SIGNATURE:

1.5.99

(401)628-3636