**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000075283

1. Corporation Name

**ECO-TECH SERVICES, INC.** 

Principal F	Place of	Business
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## FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90083 034 \*\*\*150.00



Principal Place	or Business		Maining Address			ļ					
22220 SANDS F		•	PO BOX 4546 DEERFIELD BEACH FL 3344	9							
BOCA RATON FL 99442			DEERFIELD BEACH TE 3344	DEERFIELD BEACH FE 33442			DO NOT WRITE IN THIS SPACE				
						3.	Date Incorp	orated or Quali	ifed		
							08/26/19				1
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	ace of Business	2				7"	65-0783				t Applicable
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Suite, Apt. 1	#, etc		Suite, Apt. #, etc.		س	5.	Certificate of	of Status Desire	d 🗆 🗀	Fee Re	
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Zip	c	ountry	L Zip /	Countr		8.	•	ation owes the	current year in		
24 33Y	3 25	1) Set	29 33442	30 US	H			roperty Tax.			⊠No
	9. Name and A	ddress of Current	t Registered Agent			10.	Name and	Address of No	w Registered	l Agent	
				8.	Name Z	402	المشمما	Mant			•
CAR				82	Street A	Address (P	) Anie (	mber is Not Acc	endeble)	<del></del> -	
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		1				iona	1764	:			zagistered
11. Pursuant t	to the provisions o	f Sections 607.0502	2 and 607.1508, Florida Statute of Florida. Such change was at	s, the abou	/e-named c / the como:	corporation oration's bo	n submits in pard of direc	is statement for stors. I hereby a	ccept the appo	ointment as re	gistered
agent, I a	m familiar with,	accept the obligat	of Florida. Such change was au tions of, Section 607.0505, Flor	ida Statute	s. , _					1 1 -	
SIGNATURE	11/10	$J_{\gamma}$		/	40 12	nhe /	Nonte	1000	-3	118 199	}
SIGNATURE	Signature typed or printe	d name of registered agen	t and title if applicable. (NOTE:	Registered Age	ent signature rec		Ginstating)	f	DATE	<del></del>	
12.		OFFICERS AN		13.			ADDITIONS	CHANGES TO	OFFICERS A		
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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.

6.4 CITY-ST-ZIP

SIGNATURE: