

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90017 047 ***150.00

DOCUMENT # P97000080562

i. Entity Name

JVC ENVIRONMENTAL, INC.

Principal Place of Business

Mailing Address

NW 30 AVE
FL 33142

2401 NW 30 AVE
MIAMI FL 33142-6443

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0790069

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HENDRICKS, ROBERT A
310 ALHAMBRA CIRCLE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
<p>PD <input type="checkbox"/> Delete</p> <p>VERGARA, MARIO</p> <p>2401 NW 30 AVE</p> <p>MIAMI FL 33142</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>TITLE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>
<p>D <input type="checkbox"/> Delete</p> <p>COSTA, LUIS</p> <p>2401 NW 30 AVE</p> <p>MIAMI FL 33142</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>TITLE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>
<p>D <input type="checkbox"/> Delete</p> <p>JOHNSTON, STEVEN W</p> <p>2401 NW 30 AVE</p> <p>MIAMI FL 33142</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>TITLE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>
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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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steve Johnson

DATE

Daytime Phone #

CR2E034 (9/99)