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 #

P97000090874 (3)

FILED Mar 19 1998 8:00am Secretary of State

WATER AND ENVIRONMENTAL SERVICES, INC.	
Principal Place of Business Mailing Address	DIA BOJII 6611 OBAIO IONA BOND 1811 INDIA DIDA 1001
POMPANO BEACH FL 33064 POMPANO BEACH FL 33064	
DO NOT	WRITE IN THIS SPACE
3. Date Incorporated or Qu	alified
10/20/1997	
2. Principal Place of Business 2a, Mailing Address 4. FEI Number	Applied For
21	\$8.75 Additional
5. Certificate of Status Des	red Fee Required
City & State City & State 6. Election Campaign Final	
23 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes or	has paid the current year Intangible
24 25 29 30 Personal Property Tax de	
g, Name and Address of Current Registered Agent 10. Name and Address of	Yew Registered Agent
LIBANOFF, IRA L 81 Name	
150 S PINE ISLAND RD, SUITE 400 82 Street Address (P.O. Box Number is Not A	cceptable)
FT LAUDERDALE FL 33324	
83	
84 City	85 Zip Code
Ad Business to the consistence of Continue COZ OF COZ and COZ 1500. Florida Continue the above a second company to the big at a second	st the purpose of changing the contatored
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereb agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	y accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ļ.
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE
	OFFICERS AND DIRECTORS IN 12
TITLE D DELETE 1.1 TITLE	Change Addition
NAME D'ALESSANDRO, GIUSEPPE 12 NAME	i i
STREET ADDRESS 1900 NW 44TH ST 1.3 STREET ADDRESS	
CITY-ST-ZIP POMPANO BEACH FL 33064 14 CITY-ST-ZIP	J
TITLE D DELETÉ 21 TITLE	Change Addition
NAME BATTISTA, MARK 22 NAME	
STREET ADDRESS 3222 SKYLANE #100 2.3 STREET ADDRESS	
CITY-ST-ZIP CARROLLTON TX 75006 2.4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE	Change
NAME BATTISTA, LOUIS 32 NAME	1
STREET ADDRESS 3222 SKYLANE #100 3.3 STREET ADDRESS	. 1
CITY-ST-ZIP CARROLLTON TX 75008 3.4. CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4. 2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	1
CITY-ST-ZIP	Change Addition
∖ "	En cuante En vocation
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS 5.4 STREET ADDRESS	, i
CTTY-ST-ZIP 5.4 CITY-ST-ZIP	·
THE DELETE ATTHE	Chance Addition
TITLE DELETE 6.1 TITLE	☐ Change ☐ Addition
TITLE DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS	☐ Change ☐ Addition

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.

SIGNATURE:

Sout

3/12/48

(954) 979-0802