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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000095354

1. Corporation Name

G4 ENVIRONMENTAL INC.



Principal Place of Business Mailing Address 8036 LONE STAR ROAD 8036 LONE STAR ROAD JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/05/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 84-1392523 Not Applicable 2761 Sebrotim \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 8. This corporation owes the current year Intangible X Yes ПNо Personal Property Tax. 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GALLIE, GEORGE A III Street Address (P.O. Box Number is Not Acceptable) 82 2761 SEBASTIAN COURT JACKSONVILLE FL 32224 83 85 Zip Code City 84 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, typed or printed name of registered agent and title if epplicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change DELETE 1.1 TITLE TITLE GALLIE III, GEORGE A. 1.2 NAME NAME 2761 SEBASTIAN COURT 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32224 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE ☐ Change ☐ Addition **VPST** 2.1 TITLE TILE GALLIE, GEN S. 2.2 NAME NAME 2761 SEBASTIAN COURT 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32224 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 chartest, or on an attachment with an appears, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)