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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary N/State DIVISION OF CORPORATIONS

DOCUMENT # P97000097338 (2)

FILED Mar 31 1998 8:00am Secretary of State

NATURAL ENVIRONMENTS, INC.					
	• .				
Principal Place	e of Business	Mailing Address			III A FOR CONTINUE FAIR I TOTAL CONTINUE F
4725 SPRING CREEK ROAD 4725 SPRING CREEK ROA)		
BONITA SPRINGS FL 34134 BONITA SPRINGS FL 3413				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	- OF THOE
				11/12/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	. Applied For
21		26		59-34 8030	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27		··· + ··· + ··· + ··· - · · · · · · · ·		9. Certificate of Status Desireo	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23	1 60	28	0	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the c Personal Property Tax due June 30.	urrent year Intangible X Yes No
24]	25 9. Name and Address of Curren		90	10. Name and Address of New Registered	
DE			81 Name		
SOYANS					
1 ' '5			1 1 .	ress (P.O. Box Number is Not Acceptable) Harbour Drive Suite	28
83					
			20	· · · · · · · · · · · · · · · · · · ·	
			84 City // (oles FI	85 Zip Code スリハス
11. Pursuant to the provisions of Soctions 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 familia with, and accept the obligations of Saction 697,0505, Florida Statutes.					
SIGNATURE	KOVONI & DOMON	Galati		3/2	198
	Signature, typed or printed name of registered age		Registered Agent signature require		
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D MONTHE TODO K	Find Office	1.1 TITLE		Change Addition
NAME CZOCEZ MODOSECC	MONTHEI, TODD K 4725 SPRING CREEK ROAD		1.2 NAME		
STREET ADDRESS CITY+ST-ZIP	BONITA SPRINGS FL 34134		1.3 STREET ADORESS 1.4 CITY-ST-ZIP		
TITLE	PVST	DELETE	21 TITLE		Change Addition
NAME	MONTHEI, TODD K	_	2 2 NAME		
STREET ADDRESS	4725 SPRING CREEK ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS FL 34134		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T never	4.4 CITY-ST-ZIP		[] Observed
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
TITLE NAME		C DECER	6.2 NAME		C clarife C required
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS	•	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
v4"			= o o E 1		

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, or on an attachment with appenderes

X 495-1409