DOCUMENT #	P97000097604

1. Entity Name

ENVIROCON, INC.

1													
Principal Place	of Business		Mailing Address										
11316 N.W. 62NI MIAMI FL 33178-	5. 62ND TERRACE 11316 N.W. 62ND TERRACE 33178-3638 MIAMI FL 33178-3638			E									
· 													
2. Principal Place of Business 101 Ocean Lanc De. 101 Ocean			3. Mailing Address	ean Lane Dr			-						
Suite Apt #, etc			Suite Ang. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State	state Sistance Fl City & State (Cey Biscance)			e F	7. 4.			El Number 65-0805413		<u> </u>	oplied For ot Applicable		
Zp 33/44	,	Country S.A	ziρ 33/49	Coun	itry 5. /-	9	5. C	ertificate of Status Desired	See Required				
	6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent					
MELDNER, \	VOI KED	-			Name	Armando A. Arango							
11316 N.W.		RACE			Street A	ddress (P	O. Bo	ox Number is Not Acceptable)	D:				
MIAMI FL 33	3178-3638					APT	,	£1011					
					City	ley 1.	313	s ca yac	FL	Zip Code	49		
8. The above n	named entity	submits this statement for	the purpose of changing its	register	ed office or	/		ent, or both, in the State of Flor	ida.				
SIGNATURE	AV	mendo A. r printed name of registered agent a	Aranco	: Registere	d Agent signate	ure required	men eir		29.0 DATE	2			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! I After May 1, 2002 Make Check Payable to				2 Fee	will be \$5	be \$550.00 Trust Fund Contributio				- - +0.00			
11.		OFFICERS AND [DIRECTORS	12.			ADE	DITIONS/CHANGES TO OFFIC	CERS AND D	IRECTORS	S IN 11		
TITLE P		.,	Delete	TITLE		Pr	-51	dent ando A. Aran	160 E	Change	☐ Addition		
	MELDNER, 1 11316 NW (ET ADDRESS	101	00 d	ean Lane D	FIOU	/			
	MIAMI FL 3	3178		CITY	-ST-ZIP	100	94	BISCAINE ?	-/ O	3/49			
	P PANGIONE	, RONALD	Delete	TITU		Di	رے	tor		Change,	Addition		
STREET ADDRESS 3)MMERCIAL BLVD., STI	E 212		ET ADDRESS -ST-ZIP	113	9/1 3/6	NW Gadter	Mian	j.F. 3.	3178		
TITLE			☐ Delete	TITLE						Change	☐ Addition		
NAME STREET ADDRESS				NAM STRE	ET ADDRESS						}		
CITY-ST-ZIP				CITY	-ST-ZIP								
TITLE			☐ Delete	TITLE						Change	☐ Addition		
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CITY-ST-ZIP				CITY	-ST-ZIP								
TITLE			☐ Delete	TITLE						_ Change	☐ Addition		
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CITY-ST-ZIP					-ST-ZIP								
TITLE			☐ Delete	TITLE					Ε	Change	☐ Addition		
NAME STREET ADDRESS				NAM! STRE	E Et address						-		
CITY-ST-ZIP					-ST-ZIP								
45 1 6 2 1 1 1	and also a sale												

13. 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:

Amando A. Aranco 4.09.02

305.3659191