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 # P97000101807 (0)

ABATEMENT CONTRACTING, INC.

Principal Place of Business Mailing Address

FILED Apr 22 1998 8:00am Secretary of State



2359 MIDDLECOFF DRIVE DUNEOIN FL 34698		2359 MIDDLECOFF DRIVE DUNEDIN FL 34698					
561125114					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
		1.4.10.4.1.			12/03/1997		
	ace of Business	2a. Mailing Address			4. FEt Number Applied For Not Applied For Not Applied For		
21		Sella Ant A ata			, JIX A 7 F		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Certificate of Status Desired		
City & State	•	Cily & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BOUTZOUKAS, MIA			14	31 Name	n ė		
235	59 MIDDLECOFF DRIVE		- t	32 Street	et Address (P.O. Box Number is Not Acceptable)		
	NEDIN FL 34698				, ,		
			T-	33			
			-	34 City	85 Zip Code		
			1	City	FL 85 Zip Code		
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.							
agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.							
SIGNATURE							
	Signature, typed or printed name of registered agent OFFICERS AND		E Registered .	Agent signatur	ture required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.		DELETE	1,5 TiTL	r.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
	DV.P.	occur					
NAME	KOKKINOS, PATTI		1.2 NAM				
STREET ADDRESS	716 VIRGINIA AVENUE			eet address	35		
CITY-ST-ZIP	TARPON SPRINGS FL 34689	Priest	_	r-ST-ZIP	☐ Change ☐ Addilion		
TITLE	D P.	☐ DELE t e	2 1 TITL		Li Change Li Addition		
NAME	BOUTZOUKAS, MIA		2.2 NAN				
STREET ADDRESS	2359 MIDDLECOFF DRIVE		2.3 STR	EET ADDRESS	SS		
CITY-ST-ZIP	DUNEDIN FL 34698		_	Y-ST-ZIP			
TITLE		☐ DELETE	3.1 TITL	E	L] Change L] Addition		
NAME			3.2 NAN	1E			
STREET ADDRESS			3.3 STR	EET ADDRESS	SS		
CITY-\$1-ZIP			3.4. CIT	Y-ST-ZIP			
TITLE		DELETE	4.1 TITL	E	☐ Change ☐ Addition		
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STR	eet address	SS		
CITY-ST-ZIP			4.4 CITY	/-ST-ZIP			
TITLE		DELETE	5.1 TITL	E	☐ Change ☐ Addition		
NAME			5.2 NAN	4E			
STREET ADDRESS			5.3 STR	EET ADDRESS	ss		
CITY-ST-ZiP				(-ST-ZIP			
TITLE		DELETE	6.1 TIT(· · · · · · · · · · · · · · · · · · ·	Change Addition		
NAME			6.2 NAN	AE .			
STREET ADDRESS	- We			EET ADDRESS	SS		
CITY-ST-ZIP				r-ST-ZIP			
14. I hereby o	ertify'that the information supplied with	this filing does not qualify f			tated 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.