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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000046045

1. Corporation Name

CPN ENVIRONMENTAL GROUP, INC.

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90053 050 ***150.00

Principal Place	e of Business	Mailing Address			II OJETA AITII OAIII AINS BIIT 1983
795 7TH ST. S.		795 7TH ST. S.			
SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695				DO NOT WRITE IN THI	S SDACE
				3. Date Incorporated or Qualifed	3 SPACE
}				05/19/1998	
2. Principal Pl	lace of Business	2a. Mailing Address	·	4. FEI Number	Applied For
21		26		59-3510697	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year to	
24	25	29 30	0]	Personal Property Tax.	¥Yes □No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registered	d Agent
QEDI:	ION IOSEDH A		Name		
SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
ļ			24 04		85 Zip Code
			84 City	F	L
l office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	norized by the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered ointment as registered
	Signature, typed or printed name of registered age		egistered Agent signature require		
12.	OFFICERS AN			A DOUTION OF THE ACTION OF THE	IND DIDECTORS IN 42
		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12 Change Addition
TITLE NAME	PTD SEPION, JOSEPH A		1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME STREET ADDRESS	PTD SEPION, JOSEPH A 795 7TH ST. S.		1.1 TITLE 1.2 NAME 1.3 STREET ADORESS	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S. SAFETY HARBOR FL 34695	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S. SAFETY HARBOR FL 34695 SD	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S. SAFETY HARBOR FL 34695 SD SCHRADER, KATHLEEN A	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S. SAFETY HARBOR FL 34695 SD SCHRADER, KATHLEEN A 795 7TH ST. S.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	Change Addition Change Addition Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S. SAFETY HARBOR FL 34695 SD SCHRADER, KATHLEEN A 795 7TH ST. S.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition Change Addition Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SEPION, JOSEPH A 795 7TH ST. S. SAFETY HARBOR FL 34695 VD SCHRADER, CHRIS J 795 7TH ST. S. SAFETY HARBOR FL 34695 SD SCHRADER, KATHLEEN A 795 7TH ST. S.	☐ DELETE ☐ DELETE ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	Change Addition Change Addition Change Addition Change Addition Change Addition
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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 conforation or the receiver or frustee 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 attackment with an address, with all other like empowered.

SIGNATURE:

JOSEPH A. SEPION OFFICER OR DIRECTOR

2-*|-"ラ*テ

Date

727- 725-2015

Daytime Phone #