2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000087991

City-St-Zip:

FILED Jan 26, 2005 Secretary of State

Entity Nan	ne: T/SEN	/IRONMENTA	L MANAGEMENT, INC.				
Current Principal Place of Business:				New Princ	New Principal Place of Business:		
12005 N AVIARY DR COOPER CITY, FL 33026				3	4210 S UNIVERSITY DRIVE 3		
Current Mailing Address:				,	DAVIE, FL 33328 New Mailing Address:		
ourient maning , taurooor					-		
12005 N AVIARY DR COOPER CITY, FL 33026				3			
				DAVIE, FL	DAVIE, FL 33328		
FEI Number: 65-0875111 FE		FEI Number	Applied For () FEI N	umber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:		
TESCHER, HOWARD A ESQ 100 NE THIRD AVE., STE 610 FORT LAUDERDALE, FL 33301 US				12005 N A	BADSTIBNER, REBECCA A 12005 N AVIARY DRIVE COOPER CITY, FL FL US		
The above in the State		submits this	statement for the purpose	of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE: REBECCA BADSTIBNER					01/26/2005		
Electronic Signature of Registered Agent					Date		
Election Can	npaign Financi	ng Trust Fund C	Contribution ().				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BADSTIBNER	ERSITY DR, STE	418	Title: Name: Address: City-St-Zip:	BADSTIBNE	ERSITY DRIVE #3	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	BADSTIBNE	() Change (X) Addition R, REBECCA A ERSITY DRIVE #3 33328	
Title: Name: Address:	() Delete		Title: Name: Address:	VAN DOREN	() Change (X) Addition , SHARON 'ERSITY DR. #3	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

DAVIE, FL 33328

SIGNATURE: PATRICK BADSTIBNER D 01/26/2005