

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087010

1. Entity Name

ECO CORP.

FILED

Jan 29, 2000 8:00 am  
Secretary of State

01-29-2000 90018 030 \*\*\*158.75

Principal Place of Business

Mailing Address

10030 ANTILLES DRIVE  
SEMINOLE FL 33776

10030 ANTILLES DRIVE  
SEMINOLE FL 33776-1408

2. Principal Place of Business

13100 PARK BLVD.

3. Mailing Address

10030 ANTILLES DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SEMINOLE FL

City & State

SEMINOLE FL

Zip

33776

Country

USA

Zip

33776

Country

USA

4. FEI Number

59-3602291

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIVERA, EDGAR  
10030 ANTILLES DRIVE  
SEMINOLE FL 33776

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DAY

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/  
RIVERA, EDGAR  
10030 ANTILLES DRIVE  
SEMINOLE FL 33776

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/S/V  
PREGALDIN, HENRI  
1712 OVERBROOK AV.  
CLEARWATER FL 33755

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/  
GIANAKIS, ANGELO  
6171 41ST AVE. N.  
ST PETERSBURG FL 33709

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/C/P  
RIVERA, EDGAR  
10030 ANTILLES DR.  
SEMINOLE FL 33776

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/  
PINER, DAN  
13760 87TH PLACE N.  
SEMINOLE FL 33776

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/V  
GIANAKIS, ANGELO  
6171 41ST AVE. N.  
ST. PETERSBURG FL 33709

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D.  
JAMES, STEVE  
13483 SORRENTO DR.  
LARGO FL 33774

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/V  
PINER, DANIEL  
13760 87th PLACE N.  
SEMINOLE FL 33776

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D  
HOWELL, STEVE  
1704 WEST SITKA ST.  
TAMPA FL 33604

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/V  
JAMES, STEVEN  
13483 SORRENTO DR.  
LARGO FL 33774

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D  
CRAWFORD, JOHN M  
1608 ALAN CT.  
NAPERVILLE FL 60544

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D/V/T  
CRAWFORD, JOHN MICHAEL  
1608 ALAN CT.  
NAPERVILLE IL 60544

☒ Change

☐ Addition

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:

HENRI PREGALDIN, SEC'Y 1/6/00 727/320-9116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #