FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S01587

(2)

TERRA SYSTEMS ENVIRONMENTAL CONSULTANTS, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address			1 140 110 10 111 EELAN 11004 01101 10111 1004 1		IA DARIN DIGIL	81 0 81 1091
2020 SHEFFIELD RD. WINTER HAVEN FL 33880 US		P.O. BOX 9115 Winter Haven FL 33883 US	WINTER HAVEN FL 33883-9115						
						3. Date Incorporated or Qualified 09/12/1990	3a. Date of Last Report 04/18/1996		
	lace of Business	<u></u> ⊢_n	2a. Mailing Address			4. FEI Number		A	oplied For
Suite, Apt.	# elc		Suite, Apt. #, etc.			59-3031426			ot Applicable
22		<u></u>	27			5. Certificate of Status Desired		,	Additional equired
City & State		City & State				6. Election Campaign Financing			
23		28	28			Trust Fund Contribution			May Be to Fees
Zip Country		Zip	Zip Country			8. This corporation has hability for in	ntangible ta		
24	25	29				Florida Statutes Yes No			
	9. Name and Address of Cur	rrent Registered Agent		81	NI	10. Name and Address of New Reg	istered A	gent	
COBURN, TJ				81	Name				
	SHEFFIELD RD.		82 Street A			ess (P.O. Box Number is Not Acceptable	e)		
ANIA	TER HAVEN FL 33880		-	83					
			[-					
			[*	84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statul	les, the ab	L 1-9vo	named corr	poration submits this statement for the pe	rrocco of c	hanging it	s registered
Office or r	egistered agent, or both, in the St m familiar with, and accept the of	tate of Florida. Such change was:	authorized	by to	he corporal	ion's board of directors. Thereby accep	t the appoi	ntment as	registered
SIGNATURE	The time thing and accopt the or	inganona or, accitor our locoto, e i	Orion State	nça.					
SIGNATURE	Signature, typod or printed name of registrace	Sagres and title if applicable. (NO)	L: Brig stered	Agen:	signature requi	red when reinstating)	DA1E		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	D COBUBLITI	☐ DELETE	1.1300		ł		L	Change	Addition
NAME	MAN CHECCIEI D. DD		1.2 NAM						
STREET ADDRESS	WINTER HAVEN FL		1.3 STR						
CITY-ST-ZIP TITLE	D	DELETE	1.4 CH1 2.1 THL		7IP			Change	Addition
NAME	UPADON DOBERT C		22 NAN		.		L	Change	L_J Addition
STREET ADDRESS	2020 SHEFFIELD RD.			2 3 STREET ADDRESS					
CITY-ST-ZIP	WINTER HAVEN FL			4 CITY - ST - ZiP					
TITLE	DELETE			31 TITLE				Change	Addition
NAME			3 2 NAN	A [
STREET ADDRESS			3 3 S1R	EET AC	DDRESS				
CITY-ST-ZIP			3.4. CIT	y - S1 -	ZIP				
TITLE		L] DELFTE	4.1 ∏∏					_] Change	Addition
NAME			4 2 NAI						
STREET ADDRESS			4.3 STR						
CITY-ST-ZIP TITLE		DELFTE	4.4 C(1)		ZIP			Change	T Addition
NAME			5.1 THU 5.2 NAN				L.	Change	L Addition
STREET ADDRESS			5.3 S1R	-	inness				
CITY-ST-ZIP			5.4 CITY		i i				
TITLE		DELETE	6.1 T(1)				Γ	Change	[] Addition
NAME			6.2 NAN				_		
STREET ADDRESS			6.3 S ¹ R	EET AD	DRESS				
CITY-ST-ZIP			6.4 CITY	Y- \$1- 2	ZIP				
14. I do hereb	by certify that the information supplied indicated on this appulational	blied with this filing does not quali	fy for the e	exemi	ption stated	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal	. I further o	orlify that	the
iam an o	flicer or director of the corporation n Block 12 or Block 13 if changed	i of the receiver of trustee empow	vered to ex	ecul	e this repor	t as required by Chapter 607, Florida St	enect as il atutes; and	that my r	uer oain; mat name

COMMENTED DE CHIOLE