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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

FILED Mar 06 1998 8:00am Secretary of State

IENNA	STOLEM	S ENVIRUNMEN	TAL CONST	JLIANIS, INC.							
Principal Plac	e of Business		Mailing	Address				L ECCONOME THE BOSON FORMS RIVED FORMS LONG LONG BIRTH	JULI DIDIL DARIL BIR	{ 	
2020 SHEFFIE	FID RD		PO B	OX 9115							
WINTER HAVI				WINTER HAVEN FL 33883-9115				DO NOT WRITE IN THIS SPACE			
								3. Date incorporated or Qualified			
								09/12/1990			
2. Principal P	Place of Busin	oss	2a. Mail	2a. Mailing Address				4. FEI Number	A	pplied For	
21			26	·				59-3031426	Not Applicable		
Suite, Apt. #, etc.			h	Suite, Apt. #, etc.				E. Certificate of Bratte Deeper		Additional	
22 City & Stat			27	····					Fee R	tequired	
City & State			i	City & State				6. Election Campaign Financing		May Be	
Zip		Country						Trust Fund Contribution		to Fees	
24	<u> </u>	25 29 30		Country	•		8. This corporation owes or has paid the				
27		and Address of Curre			0			Personal Property Tax due June 30. 10. Name and Address of New Registere		_] No	
00					81	Name	,	IV. Hame and Assistant of Ham ringistant	o Agein		
COBURN, TJ											
2020 SHEFFIELD RD. WINTER HAVEN FL 33880					82	Street	Addres	ddress (P.O. Box Number is Not Acceptable)			
17711	NIEK DAVE	N FL 33860			83	 		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
						1					
					84	City		F	85 Zip	Code	
11 Pursuant	to the provision	ons of Sections 607 Of	02 and 607 15	08 Florida Statutos	the above	o-pamer	d corpor	ation submits this statement for the purpose		to conintered	
office or r	egistered age	ont, or both, in the Stat	o of Florida, Si	ich change was au	thorized by	y the cor	rporation	n's board of directors. I hereby accept the a	ppointment as	registered	
agentia	ımı tamılılar witi	n, and accept the obti	gations of, Sec	tion 607.0505, Flori	da Statute	s.					
SIGNATURE	Street so bread	or product name of registered a	and sout title discust.	ALOUT (ALOUT)	Dominion of Ac-			when reinstating) DATE			
12.	Olgoniano, sprant		VD DIRECTOR		13.	ent alghatur	e required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A			
TITLE	D						P/T	Change	Addition		
NAME	COBURN, TJ							BURN, TJ	Jan Strange		
STREET ADDRESS		EFFIELD RD.			1.3 STREET	ADDRESS	202	O SHEFFIELD RD		[8	
CITY-ST-ZIP		HAVEN FL			1.4 CITY - S			TER HAVEN FL 33880			
TITLE	D			DELETE	2.1 TITLE	1-4m	VP		Change	Addition	
NAME		, robert s. *			2.2 NAME			SERT S. HEARON	2.301.30		
STREET ADDRESS		EFFIELD RD.		235			700	to sheffield road			
CITY-SI-ZIP WINTER HAVEN FL & COLOR			and an Din	1 O M alchar			14/14	VIER HAVEN PL 33880			
TITLE	******	The state of the s	~~~~	DELETE	2 4 CITY- 3.1 TITLE	31-51L	144 17	TER WHILN PR 3308U	Change	Addition	
NAME					32 NAME						
STREET ADDRESS					3.3 STREET	ADDRESS	1				
CITY-ST-ZIP					3.4. CITY-5					1	
TITLE				DELETE	4.1 TITLE	21-61	 		Change	Addition	
NAME					4. 2 NAME						
STREET ADDRESS					4.3 STREET	ADDRESS				l	
CITY-ST-ZIP					4.4 CiTY - S						
TITLE			···	DELETE	5.1 TITLE	11 - LH	†		Change	Addition	
NAME					5.2 NAME		İ				
STREET ADDRESS					5.3 STREET	ADDRESS					
CITY-ST-ZIP					5.4 CITY-S						
TITLE				DELETE	6.1 TITLE	. 211	 		Change	Addition	
NAME					6.2 NAME						
STREET ADDRESS					6.3 STREET	ADORESS	1				
CITY-ST-ZIP					6.4 CITY-S						

14. Thereby 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 supplimental 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.

SIGNATURE: