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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

CITY-ST-ZIP

DOCUMENT # S15353

(3)

FLORIDA ENVIRONMENTAL QUALITY, INC.

FILED Apr 29 1997 8:00am Secretary of State

Principal Plac	ee of Business	Mailing Address					
3301 NW 82 AVE. MIAMI FL 33122 US		3901 NW 82 AVE. MIAMI FL 33122-1025 US					
					3. Date Incorporated or Qualified 11/29/1990	3a. Date of Last 05/01/1996	Report
2. Principal Place of Business		2a, Mailing Address	h1		4. FEI Number		Applied For
Suite, Apl. #, etc.		Suite, Apt. #, etc.	Suite Ant # etc		65-0232788	¢0.75	Not Applicable Additional
22		27		5. Certificate of Status Desired		Required	
City & State		City & State		6. Election Campaign Financing	\$5.00	0 May Be	
23		28	L Country		Trust Fund Contribution		d to Fees
Zip Country 25		7ip 29	30 Country		S. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
241	9. Name and Address of Currer		30		10. Name and Address of New Re		
DEL	PEZZO, LORELLA	· - · · · · · · · · · · · · · · · · · ·	81	Name			· • · · · · · • · · · · · · · · · · · ·
	1 NW 82 AVE.		82	Street Addre	ess (P.O. Box Number is Not Acceptab	ole)	
MIA	MI FL 33122					<u> </u>	
			83				
			84	City		Et 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida Statute	as, the above	named corp	pration submits this statement for the p	urpose of changing	its registered
office or agent. La	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was a ations of, Section 607,0505, Flo	iuthorized by irida Statutes	the corporati s.	oration submits this statement for the p on's board of directors. I hereby accep	ot the appointment a	s registered
SIGNATURE							
Signature, typed or profee name of ingesteror at 12. OFFICERS AN		intanutional applicability (NOTE: Registered Agent signaturic required DIRECTORS 13.		nt signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE	EDO AND DIDECTO	1DC IN 12
TITLE	PSTD	DELETE			ADDITIONS/CHANGES TO OTTIC	Change	
NAME	NERINI DEL PEZZO, L		1.2 NAME				
STREET ADDRESS 3301 NW 82 AVE			1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33122		1.4 CITY - S1 - ZIP				
TITLE		☐ DELFTE	2.1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET				
CITY-ST-ZIP TITLE			2 4 CPY-3 3 1 1/11	ST - ZIP		☐ Change	Addition
NAME			3.2 NAME				C Addition
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP	Р		34 CHY-5				
TITLE	DELETE		4 ° 1ITEE			Change	Addition
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
City-St-ZiP		britte	4.4 CHY-ST-7/P				a and a
TITLE		☐ DELFTE	5. TITLE			∐ Change	Addition
STREET ADDRESS			5.2 NAME	Athibutoe			
CITY-ST-ZIP			53 STREET				
TOTE 51-219			5.4 Crity-S	1.7.1		Change	Addition

14. I do 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the composition or the receipted or explored do execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if chapter 607 in an axis three withing address.