Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90078 015 \*\*\*158.75

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **S20310**

1. Corporation Name

MP ENVIRONMENTAL RESOURCE COMPANY

		-					ŀ					
Principal Place of Business			Mailing Address					f smillimin ien einte marnen trimi einer anne mine	AIBII ALBII A	1411 878	H BASIL IGG	
3201 W. HALLANDALE BCH. BLVD. PEMBROKE PARK FL 33023			3201 W. HALLANDALE BCH. BLVD. PEMBROKE PARK FL 33023					DO NOT WRITE IN THIS SPACE				
US US								3. Date Incorporated or Qualifed				
	•							12/20/1990			]	
2. Principal Pla	ace of Business	2a.	Mailing Address					4. FEI Number		Appli	ed For	
21		26	· ·					65-0237523		Not /	Applicable	
Suite, Apt. #	f etc.	<del> </del> -	Suite, Apt. #, etc.						\$8.7	<b>5</b> .Ad	ditional	
22		27						=5.=Certifcate-of-Status Desired	Fe	e Requ	uired	
City & State	,	<del>- 1=:1</del> -	City & State					6. Election Campaign Financing	\$5.	00 м	lav Be	
23		28	·				l	Trust Fund Contribution		ded to		
Zip	Country	1-0,	Zip	Count	try			8. This corporation owes the current year	ntangible			
24	25	29	30	0				Personal Property Tax.	☐ Yes		]No	
	9. Name and Address of Curren			<u> </u>		-		10. Name and Address of New Registere	d Agent			
				8	81	Name						
MOSELY, MARION					-	Di 1 /		s (P.O. Box Number is Not Acceptable)				
3201 W. HALLANDALE BCH. BLVD.					82 Street Addres			s (P.O. Box Number is Not Acceptable)			i	
PEMBROKE PARK FL 33023					B3							
			•	L	_				12-1-			
				8	84	City		F	85	Zip Co	de	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling)  DATE												
12.	OFFICERS AN	D DIRE	CTORS	13.				ADDITIONS/CHANGES TO OFFICERS				
TITLE	STD		☐ DELETE	1.1 TITLI	E				☐ Cha	nge	☐ Addition	
NAME	MOSELY, MARION			1.2 NAM	Æ	1					1	
STREET ADDRESS	3201 . HALLANDALE BCH BLVD				EET	ADDRESS					i	
CITY-ST-ZIP	PEMBROKE PARK FL			1.4 CITY	/-ST	-ZIP						
TITLE	PD ·		☐ DELETE	2.1 TITL	£				Cha	nge	Addition	
NAME I	PADGETT, LONNIE			2.2 NAM	Æ	\					í	
STREET ADDRESS	3201 W. HALLANDALE BCH BI	LVD		2.3 STRI	EET	ADDRESS						
CITY-ST-ZIP	PEMBROKE PARK FL			2. 4 CIT	Y-S1	T-ZIP		<u></u>				
TITLE			☐ DELETE	3.1 TITL	£			<del></del>	☐ Cha	nge	Addition	
NAME				3.2 NAM	Æ							
STREET ADDRESS				3.3 STR	EET	ADDRESS						
CITY-ST-ZIP	•			3.4. CITY	Y-\$1	T-ZIP						
TITLE			☐ DELETE	4.1 TITU	_				☐ Cha	nge	Addition	
NAME				4, 2 NAA	ME							
STREET ADDRESS				1		ADDRESS						
				4.4 CITY								
CITY-ST-ZIP			□ DELETE	5.1 TITI		-411	· -		☐ Cha	nge	Addition	

6.4 CITY-ST-ZIP 14. 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 annual report or supplemental 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, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

DELETE

954-961-7200

Change

☐ Addition