

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

FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S20361 (9)

1. Corporation Name
ENVIRONMENTAL PRODUCTS USA, INC.

Principal Place of Business

505 PAUL MORRIS DR.
ENGLEWOOD FL 34223
US

Mailing Address

505 PAUL MORRIS DR.
ENGLEWOOD FL 34223
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1991

4. FEI Number

65-0232958

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes ☐ No

2. Principal Place of Business

21 730 COMMERCE DR

2a. Mailing Address

26 730 COMMERCE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 VENICE, FL

24 34292

Country

25 USA

27 City & State

28 VENICE, FL

29 34292

Country

30 USA

9. Name and Address of Current Registered Agent

MURPHY, MYRIAM L.
2030 WHITE FEATHER LANE
MOKOMIS FL 34275

10. Name and Address of New Registered Agent

81 Name

BOGDAN KORSZEN

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

730 COMMERCE DR

83

84 City

VENICE

FL

85 Zip Code

34242

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

Bogdan Korszen

BOGDAN KORSZEN CEO/TREASURER 4/9/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VS ☐ DELETE

NAME KORSZEN, DOROTHY L.
STREET ADDRESS 2060 LARSON ST.
CITY-ST-ZIP ENGLEWOOD FL

TITLE V ☐ DELETE

NAME MURPHY, ROBERT T.
STREET ADDRESS 2822 NORWOOD LN
CITY-ST-ZIP VENICE FL

TITLE PT ☐ DELETE

NAME MURPHY, MYRIAM L.
STREET ADDRESS 2030 WHITE FEATHER LANE
CITY-ST-ZIP NOKOMIS FL

TITLE V ☐ DELETE

NAME MURPHY, GERALD
STREET ADDRESS 421 SHAMROCK DR.
CITY-ST-ZIP VENICE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE PRESIDENT ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE CLOSUIT, EDWARD ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

2030 WHITE FEATHER LANE
NOKOMIS, FL
CEO / TREASURER
KORSZEN, BOGDAN
2060 LARSON ST
ENGLEWOOD, FL 34223

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.

SIGNATURE:

Bogdan Korszen

BOGDAN KORSZEN 4/09/98 (941) 480-9101

CR2E034 (1097)