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FILED
May 05 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 # S51126 (8)

1. Corporation Name
FQS ENVIRONMENTAL SERVICES, INC.



Principal Place of Business
3063 HARTLEY RD
STE 2
JACKSONVILLE FL 32257
US

Mailing Address
3063 HARTLEY RD
STE 2
JACKSONVILLE FL 32257
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/01/1991	
4. FEI Number 59-3097787	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 6668 COLUMBIA PK DR So Suite, Apt. #, etc. 22 City & State 23 JACKSONVILLE, FL Zip 24 32258	2a. Mailing Address 26 6668 COLUMBIA PK DR So Suite, Apt. #, etc. 27 City & State 28 JACKSONVILLE, FL Zip 29 32258	Country 25 USA 30 USA
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9. Name and Address of Current Registered Agent

ROWE & ROWE PA
9471 BAYMEADOWS RD
SUITE 203
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	
NAME	GUTHRIE, JOSEPH E	1.2 NAME	
STREET ADDRESS	4057 SHADY CREEK LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	VPTD	2.1 TITLE	
NAME	CHESNEAU, HOWARD L	2.2 NAME	
STREET ADDRESS	1754 GREEN RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BUFORD GA	2.4 CITY-ST-ZIP	
TITLE	C	3.1 TITLE	
NAME	GUTHRIE, NADINE J	3.2 NAME	
STREET ADDRESS	4057 SHADY CREEK LN.	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32223	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE *[Signature]* 04-22-98 944-264-1856

CR2E034 (10/97)