PROFIT **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90038 008 ***150.00

DOCL	JMENT	# S831	60
	J V	" "	rıw

1. Corporatio	NAME VIRONMENTAL GROUP, INC.					`					
Principal Plac	e of Business	Mailing Addre	ess	· · · · · · · · · · · · · · · · · · ·	_		1	f (Beteben int inion tilat tinio niita enti nioii a	IGII SIBII	BIRSI BIG	ALL BIRKI IROI
2301 NW 33RD CT. SUITE # 115 POMPANO BCH FL 33069		2301 NW 33RI SUITE # 115	2301 NW 33RD CT.				DO NOT WRITE IN THIS Date Incorporated or Qualifed	SPACE	<u> </u>		
								09/24/1991			
2 Principal F	Place of Business	2a. Mailing A	ddress					FEI Number		App	lied For
21		26						65-0290982		Not	Applicable
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.				5.	Certificate of Status Desired		. 75 A	dditional
22		27 City & St									-
City & Stat	e	├ ′	ate				6.	Election Campaign Financing Trust Fund Contribution		ded to	May Be
Zip	Country	Zip		Country			+-	This corporation owes the current year Int	<u> </u>		
24	25	29	30	- ·			8.	Personal Property Tax.	Yes		□No
24	9 Name and Address of Curre			<u> </u>			10.	Name and Address of New Registered	Agent		
	3. 1741110			81	1	Name					
	slow, Kelly S			-	ļ.,	Ct A d d	/5	P.O. Box Number is Not Acceptable)			
5451 PINE TREE RD			82	ľ	Street Addres	SS (P	O. Box Number is Not Acceptable)				
COF	AL SPRINGS FL 33067			83	 						
1				84	L,	0'1			85	Zip C	odo
				84	۱ ٔ	City		FL	. 89	Zip O	000
office or	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such cl	range was auth	nonzed by	tn€	named corpore e corporation	ration n's bo	n submits this statement for the purpose of pard of directors. I hereby accept the appo	changi intment	ng its r as reg	egistered istered
SIGNATURE			WOTE: D		-4 mi	ignature required	uhan r	reinstating) DATE			
12.	Signature, typed or printed name of registered age	ND DIRECTORS	(NOTE: RE	13.	it Si	ignatore required		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRI	ECTOR	RS IN 12
TITLE	DP		DELETE	1.1 TITLE				ADDITIONOLIS IN COLOR OF THE CO	Ch		☐ Addition
NAME	WINSLOW, KELLY S			1.2 NAME				•			٠,
STREET ADDRESS	5451 PINE TREE RD			1.3 STREET	T AD	DORESS					
CITY-ST-ZIP	CORAL SPRINGS FL			1.4 CITY- \$	T-Z	IP					
TITLE	SVP		DELETE	2.1 TITLE				•	☐ Ch	ange	☐ Addition
NAME	WINSLOW, KIM B			2.2 NAME		İ		•			
STREET ADDRESS	11835 MOUNTAIN PARK RD			2.3 STREET	ΓAD	DDRESS					
CITY-ST-ZIP	ROSWELL GA			2. 4 CiTY-S	ST-2	ZIP .			• 1		
TITLE	DS		OELETE	3.1 TITLE				4	∑ ZCh	ange	☐ Addition
NAME	TROESTER, AUDREY-L			3.2 NAME		l W	ins	slow, Audrey L.			
STREET ADDRESS				3.3 STREET	TAE	- 1		•			
CITY-ST-ZIP	CORAL SPRINGS FL			3.4. CITY- S	T- Z	ZIP					
TITLE	DT		DELETE	4.1 TITLE					Ch	ange	Addition
NAME	WINSLOW, KIMBERLY F			4.2 NAME							
STREET ADDRESS	11835 MOUNTAIN PARK RD			4.3 STREET	ΓAC	DDRESS					

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.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ROSWELL GA

ED NAME OF SIGNING OFFICER OR DIRECTOR

Change

Change

Addition |

☐ Addition