

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

FILED

Feb 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S96887 (2)

1. Corporation Name

ENVIROTEC SERVICE SPECIALISTS, INC.



Principal Place of Business 8090-A NAVARRE PKWY NAVARRE FL 32566 US	Mailing Address 8090-A NAVARRE PKWY NAVARRE FL 32566-7550 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/27/1991	3a. Date of Last Report 05/01/1996
21		26		4. FEI Number 59-3102576	Applied For Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ORTH, ROBERT J.L. 9139A MILITARY LANE NAVARRE FL 32566				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P. O. Box Number is Not Acceptable)
				83	
				84	City
				FL	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 resigning)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ORTH, ROBERT J.L.			1.2 NAME			
STREET ADDRESS	9139 MILITARY LANE			1.3 STREET ADDRESS			
CITY - ST - ZIP	NAVARRE FL			1.4 CITY - ST - ZIP			
TITLE	VP	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ORTH, ROBERT J.L.			2.2 NAME			
STREET ADDRESS	9139 MILITARY LANE			2.3 STREET ADDRESS			
CITY - ST - ZIP	NAVARRE FL			2.4 CITY - ST - ZIP			
TITLE	T	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ORTH, ROBERT J.L.			3.2 NAME			
STREET ADDRESS	9139 MILITARY LANE			3.3 STREET ADDRESS			
CITY - ST - ZIP	NAVARRE FL			3.4 CITY - ST - ZIP			
TITLE	S	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ORTH, ROBERT J.L.			4.2 NAME			
STREET ADDRESS	9139 MILITARY LANE			4.3 STREET ADDRESS			
CITY - ST - ZIP	NAVARRE FL			4.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY - ST - ZIP				6.4 CITY - ST - ZIP			

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 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:

Robert J. Orth

CR2E034 (9/96)