Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90106 035 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # V01796

<ol> <li>Corporation</li> </ol>	1 Name							
AA ENVIRONMENTAL, INC.						A 100 A		
D: : 101		Mailing Addross		_		-   1848   1910   1860   1861   1861   1861   1861   1861   1861   1861   1861   1861   1861   1861   1861   1		
Principal Place of Business Mailing Address								
9327 CR 476B 9327 CR 476B BUSHNELL FL 33513 BUSHNELL FL 33513								
US US						DO NOT WRITE IN THIS SPACE	$\neg$	
						3. Date Incorporated or Qualifed 12/18/1991	-	
2 Principal Pl	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number Applied For	┪	
21		26				59-3108478 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	ļ	
22		27			*	ree Required	4	
City & State	е	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip Country		Zip	Coun	ountry		8. This corporation owes the current year Intangible		
24	25 29 30		30			Personal Property Tax.	4	
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered Agent	$\dashv$	
MAR	QUES, FRANK		Ľ	0,1				
9327 CR 476B				82	Street Addre	dress (P.O. Box Number is Not Acceptable)		
BUSI	HNELL FL 33513		-	83		,	٦	
			-	0.4	City	85 Zip Code	$\dashv$	
				84	City	FL     `	╝	
office or re	egistered agent or both, in the State.	of Florida, Such change was	authorized	nv t	tne corporation	ration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Fi	orida Statut	les.		•		
SIGNATURE	Olevania de la constanta de la	the state of contraction (NOT	E Panistared 6	hent	t signature required	when reinstating) DATE	١	
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re OFFICERS AND DIRECTORS		<u> </u>	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	╛	
TITLE	P			I.1 TITLE		☐ Change ☐ Addition	n	
NAME	MARQUES, FRANK		1.2 NAN	1.2 NAME		-		
STREET ADDRESS	*****		1.3 STR	1.3 STREET ADDRESS			- {	
CITY-ST-ZIP			1.4 C/T		-ZIP	Change Additio	$\perp$	
TITLE	S	☐ DELETE	2.1 TIΠ			. [] Change [] Addition	" {	
NAME	SMITH, W.C. 808 EAST 53RD AVE. #100			2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP				
STREET ADDRESS						والمنافي المستوري والمراجع والمراجع المراجع ال	-{	
CITY-ST-ZIP	VP	☐ DELETE	3.1 TITL		1-23	Change Additio	n	
NAME	WILLIAMS, ROBERT		3.2 NAA	ИΕ		·		
STREET ADDRESS	34685 SIBLEY RD		3.3 STF	3.3 STREET ADDRESS		,		
CITY-ST-ZIP	NEW BOSTON MI		3.4. CIT	Y-\$1	T-ZIP		4	
TITLE		☐ DELETE	4.1 TITL			☐ Change ☐ Additio	n j	
NAME			4. 2 NA				١	
STREET ADDRESS					ADDRESS		l	
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CIT		- 415	Change Additio	<u></u>	
NAME		<u></u>	5.2 NAM			, ;	Ì	
STREET ADDRESS			5.3 STR	REET	ADDRESS	· ·	ļ	
CITY-ST-ZIP			5.4 CIT	5.4 CITY- ST-ZIP			╝	
TITLE		☐ DELETE	6.1 TITL	E.		☐ Change ☐ Addition	n	
NAME			6.2 NAM		}			
STREET ADDRESS	1		6.3 STF	REET	ADDRESS	•	- {	

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 suppliemental 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

AME OF SIGNING OFFICER OR DIRECTOR