

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90195 023 ***158.75

DOCUMENT # V27703

1. Corporation Name

BAUER ENVIRONMENTAL, INC.



Principal Place of Business

4111 HENDERSON BLVD
STE B
TAMPA FL 33629
US

Mailing Address

4111 HENDERSON BLVD
STE B
TAMPA FL 33629
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/06/1992

4. FEI Number

59-3121041

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 the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 2058 Clematis Street

2a. Mailing Address

26 P.O. Box 10068

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 SARASOTA Florida

City & State

28 TAMPA, Florida

Zip

24 34239

Country

25 USA

Zip

29 33679-0068

Country

30 USA

9. Name and Address of Current Registered Agent

BAUER, EUGENE
4111 HENDERSON BLVD
STE B
TAMPA FL 33629

10. Name and Address of New Registered Agent

81 Name

BAUER EUGENE

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

2058 Clematis Street

83

84 City

SARASOTA

FL

85 Zip Code

34239

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

TITLE DPVS ☐ DELETE
NAME BAUER, EUGENE
STREET ADDRESS 4111 HENDERSON BLVD STE B
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 DPVS ☒ Change ☐ Addition
1.2 NAME BAUER EUGENE
1.3 STREET ADDRESS 2058 Clematis Street
1.4 CITY-ST-ZIP SARASOTA Florida 34239

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ 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 ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

Eugene Bauer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/28/99

Daytime Phone #

(727) 894-4643
813240-3987

CR2E034 (1/198)

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