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

May 05 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)**ENVIROPRO CORPORATION** Principal Place of Business Mailing Address 340 NW 132ND AVE 340 NW 132ND AVE MIAMI FL 33182 MIAMI FL 33182 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/16/1992 2. Principal Place of Business 2a. Mailing Address FEI Numbe Applied For 65-0326004 21 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 30 24 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PERDOMO, MIRIAM 340 NW 132ND AVE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33182** 83 Zip Code and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Edicial Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered above it, Section 607, 0505, Florida Statutes. 2-23-98 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES DELETE 11 TITLE Change Addition TITLE NAME PERDOMO, MIRIAM 1.2 NAME 3R2E034 340 NW 132ND AVE STREET ADDRESS 1.3 STREET ADDRESS **MIAM! FL 33182** CITY-ST-ZIP 1.4 CITY - ST- 7IP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-2IP 2 4 CITY-ST-2IP DELETE ☐ Change Addition TITLE 3.1 TITLE 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5 1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE Change TITE E NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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14. Thereby 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with ap address.

CITY-ST-ZIP

SIGNATURE:

FILED