

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # V36302

1. Entity Name
ENVIRONMENTAL INFORMATION SYSTEMS, INC.



Principal Place of Business
**691 ACACIA AVE.
MELBOURNE VILLAGE, FL 32904**

Mailing Address
**691 ACACIA AVE.
MELBOURNE VILLAGE, FL 32904**



04192008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3129569

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**DUEDALL, IVER W.
691 ACACIA AVE.
MELBOURNE VILLAGE, FL 32904**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Iver W. DuEdall
IVER W. DUEBALL

20 April 08
20 April 08

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DUEDALL, IVER W.
STREET ADDRESS	691 ACACIA AVE.
CITY-ST-ZIP	MELBOURNE VILLAGE, FL
TITLE	D
NAME	SHIEH, CHIH-SHIN
STREET ADDRESS	636 FISHTAIL PALM BLVD.
CITY-ST-ZIP	MELBOURNE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 April 08
21 April 08 321-615-0590

Date

Daytime Phone #