

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2007 08:00 A
Secretary of State

DOCUMENT # V48148

1. Entity Name
ESI REMOVAL, INC.



Principal Place of Business

102 N 20TH ST
TAMPA, FL 33605

Mailing Address

102 N 20TH ST
TAMPA, FL 33605



01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3101034

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SWINDLE, EDWARD
102 N 20TH ST
TAMPA, FL 33605

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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

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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000654019
03/13/07-80045-011 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME SWINDLE, EDWARD
STREET ADDRESS 102 N 20TH ST
CITY-ST-ZIP TAMPA, FL

TITLE D
NAME SWINDLE, RODNEY
STREET ADDRESS 102 N 20TH ST
CITY-ST-ZIP TAMPA, FL

TITLE P
NAME SWINDLE, LAURENCE E
STREET ADDRESS 102 N. 20TH ST
CITY-ST-ZIP TAMPA, FL 33605

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Edward Swindle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/07
Date

813 248-6248
Daytime Phone #