


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F99000006383**

1. Entity Name  
MANHATTAN ENVIRONMENTAL INC.



Principal Place of Business  
5601 S 122ND EAST AVE  
TULSA, OK 74146

Mailing Address  
5601 S 122ND EAST AVE  
TULSA, OK 74146

**DO NOT WRITE IN THIS SPACE**



04212005 No Chg-P CR2E034 (10/03)

4. FEI Number  
73-1098069

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**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 \_\_\_\_\_  
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, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	GEISINGER, JIM B
STREET ADDRESS	5601 S 122ND EAST AVE
CITY-ST-ZIP	TULSA, OK 74146
TITLE	VD
NAME	GIBBS, CHARLES
STREET ADDRESS	5601 S 122ND EAST AVE
CITY-ST-ZIP	TULSA, OK 74146
TITLE	P
NAME	RAINS, BOB
STREET ADDRESS	5601 S 122ND EAST AVE
CITY-ST-ZIP	TULSA, OK 74146
TITLE	S
NAME	LAWSON, JIM
STREET ADDRESS	5601 S 122ND EAST AVE
CITY-ST-ZIP	TULSA, OK 74146
TITLE	T
NAME	BROWN, RAY
STREET ADDRESS	5601 S 122ND EAST AVE
CITY-ST-ZIP	TULSA, OK 74146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000353962  
05/03/05-80088-022 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Ray Brown Ray Brown 4-22-05 918-583-6900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #