

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

FILED
Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J49247 1. Corporation Name 126th AVENUE LANDFILL, INC.					
Principal Place of Business 5833 126TH AVE. N. CLEARWATER, FL 33760			Mailing Address 5833 126th AVE N CLEARWATER, FL 33760		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/03/1986	
21	22	23	24	25	26
Suite, Apt. #, etc.		City & State		Zip	Country
27		28		29	30
City & State		City & State		Zip	Country
9. Name and Address of Current Registered Agent RICHARD L. SR HAIN, RICHARD L SR 5833 126th AVE N CLEARWATER, FL 33760			10. Name and Address of New Registered Agent		
81			82		
Name			Street Address (P.O. Box Number is Not Acceptable)		
83			84		
			City		
			FL 85		
			Zip Code		
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 Florida Statutes.					
SIGNATURE _____ DATE _____					
Signature (Type or print name of person signing and title if applicable) (If "C", Registered Agent Signature required when registering)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
300002549243 -06/05/98-01085-002 ***150.00					

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 filing 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 in an attachment with an address.

SIGNATURE: _____

Signature and Title of Registered Agent or Director
5/20/98 813-539-1083

CR2E034 (10/97)