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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

F9700006484 (6) DOCUMENT #

PAUL J. MURRAY, C.P.A., A PROFESSIONAL ASSOCIATI

Principal Place of Business

**SIGNATURE:** 

1040 N. KING'S HWY. SUITE 600

Mailing Address

1040 N. KING'S HWY, SUITE 600

## **FILED** Apr 10 1998 8:00am Secretary of State



CHERRY HILI	NJ 08034	CHERRY HILL NJ 08034			
				DO NOT WRITE IN THI	IS SPACE
_	•			3. Date Incorporated or Qualified 12/09/1997	
_ ,,	lace of Business	2a. Mailing Address	200 40-26	4. FEI Number	Applied For
	IN E SUSTANTE		CH WASTE BU	22-2360339	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			1 Fo	6. Election Campaign Financing	\$5.00 May Be
Zip Country Zip Country Country Country			Country	Trust Fund Contribution	Added to Fees
24 TO Q	159 50 11 10	- 20 9 16 G +	30 0 SA	<ol><li>This corporation owes or has paid the of Personal Property Tax due June 30.</li></ol>	current year Intangible
4-1	9. Name and Address of Current			10. Name and Address of New Registere	
MURRAY, PAUL J 81				10.	o rigorit
1622 E. SCHWARTZ BLVD					
LADY LAKE FL 32159			82 Street Addre	ress (P.O. Box Number is Not Acceptable)	
83					
			84 City		85 Zip Code
11. Pursuant 1	to the provisions of Sections 607.0502	and 607 1508. Florida Statuter	s, the above-named corp	Poration submits this statement for the purpose	of changing its registered
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 lampiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
	PASL J MUKA	(A)	/ 1 L	3-7	-98
SIGNATURE	Signature, typed or printed name of registered agent	t and yile if applicable (NOTE:	V V )	red when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	CPT	☐ DELETE	1.1 TITLE		Change Addition
NAME	MURRAY, PAUL J		1.2 NAME		
STREET ADDRESS	1622 E. SCHWARTZ BLVD		1.3 STREET ADDRESS		
CITY-ST-ZIP	LADY LAKE FL 32159		1.4 CITY - ST - ZIP		
TITLE	SD NIEDOW DIANE T	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MURRAY, DIANE T		2.2 NAME	ú <del>e</del>	
STREET ADDRESS	201 PRINCETON AVE		2.3 STREET ADDRESS	* <i>:</i>	•
CITY-S1-Z#P	STRATFORD NJ 08084	·····	2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T or the	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME					டர் பள்பு ட Mudition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP					
14. Thereby o	ertify that the information supplied with	h this filing does not qualify for	6.4 City-St-ZiP	Section 119.07(3)(i). Florida Statutes I further	certify that the information
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 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in					
Block 12 or Block 13 if changes, of on an attachment with an address.					

PAUL J MURROY