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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCU 1. Corporation	MENT # K1067	7 (8)			
KITCHI	ens septic tank servici	E, INC.			
Principal Plac	ce of Business	Mailing Address			
747 POPASH	ROAD	1849 KEN MCLEOD RD		j	
POPASH RD WAUCHULA	FL 33873	WAUCHULA FL 33873 US		DO NOT WRITE IN	THIS SPACE
us		00		3. Date Incorporated or Qualified	
		N 10		01/04/1988	
2. Principal i	Place of Business	2a. Mailing Address 26		4. FEI Number 65-0026358	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			CQ 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution L.	
24	25	29 3	¬ '	This corporation owes or has paid to Personal Property Tax due June 30.	
	g. Name and Address of Curre		1	10. Name and Address of New Regist	
	CHENS, ROCKY A.		81 Name-	Rusty Kitchens	
RTY BOX 411		82 Street	Address (P.O. Box Number is Not Acceptable)	1	
POPASH RD.			83	1849 hen Mal-cook	<u>ac</u>
עע	KOCHULA FL 33873				
			84 City	Nauchula	FL 85 Zip Code 33873
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					
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, Section 607.0505, Florida Statutes.					
SIGNATURE	Signatily, typed or printed name of registered age	onland little if applicable. (NOTE, F	Registered Agent signature		2-16-98
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change
NAME	KITCHENS, ROCKY A.	!	1.2 NAME		·
STREET ADDRESS	RT 2 BOX 411		1.3 STREET ADDRESS	747 Popush Road Wandrulg TE 33873	
CITY-ST-ZIP	WAUCHULA FL	Delete	1.4 CITY-ST-ZIP	Wandrulg 12 33873	Ottom El Arrela
TITLE	VP PROBLEMS BLISTY	DELETE	2.1 TITLE		L Change L Addition
NAME STREET ADDRESS	KITCHENS, RUSTY 1849 KEN MCLEOD ROAD		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	WAUCHULA FL 33873		2.4 CITY-ST-ZIP		
TITLE	1111001100111 00010	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		<u> </u>
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		The said	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	<u> </u>	DELETE	5.4 CITY - ST - ZIP	<u> </u>	Change Addition

CITY-ST-ZIP 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 changed, or on an all achiment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

2-16-98

(941)773-6678

FILED

Feb 20 1998 8:00am

Secretary of State