FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # L68525

PIPELINE SANITATION, INC.

Principal Place	of Business	Mailing Address						
1684 33 AVE VERO BEACH FL 32960		1684 33 AVE VERO BEACH FL 32980						
					3. Date Incorporated or Qualified 04/23/1990	3a. Date 01/0	of Last F)8/199	•
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			59-3012569			Not Applicable
Suite, Apt. #	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State	!	City & State			Election Campaign Financing Trust Fund Contribution			00 May Be ad to Fees
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has hability for in Florida Statutes Yes		under s	199.032,
	9. Name and Address of Curren				10. Name and Address of New Ro	egistered A	gent	
			81	Name				
BICHLER, STEPHAN A 1684 33 AVE			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
	ACH FL 32960		83					
			64	City		FI	85 Z	ip Code
familiar wit	th, and accept the obligations of Soci	on 607.0505, Florida Statutes	S O'E Fregulated Ajer		and of directors. Thereby accept the appointment of directors.	DAIL	egisteret	. agom
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTO	ORS IN 12
TITLE	PS	☐ DELETE	1 1 THEE			Ī) Change	Addition
NAME	BICHLER, STEPHAN A		1.2 NAME					
STREET ADDRESS	1684 33 AVE		1.3 STREET	ADURESS				-
CITY-ST-ZIP	VERO BEACH FL 32960		1.4 CHY-S	ir - Z IP				
TITLE	VT	[] DELETE	2 1 TITLE			L.) Change	Add-tion
NAME	GODFREY, SHEILA J		2.2 NAME					
STREET ADDRESS	1684 33 AVE		2.3 STREET					
CITY-ST-ZIP TITLE	VERO BEACH FL 32960	☐ DELETE	24 CITY - 5	1 - 216			7 Change	Add tion
NAME			3 2 NAME			L.	1 0.41.9.	
STREET ADDRESS			3.3 STREE	T &F DRESS				
CITY-ST-ZIP			3.4 CiTy - 5	i				
TITLE		[] DELETE	4 1 11116				Change	Addition
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY - ST - ZIP			4.4 CiTy - 5	1-216				
TITLE		☐ DELETE	5 1 TIFLE] Change	☐ Addition
NAME			5 2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST ZIP			5.4 CITY - 5	T - 71P	·			
TITLE		DELETE	6 1 THE] Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE					
CITY-ST-7iP			640414-9	T-ZIP				

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 logal 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 attachment with an address.

5/17/96