


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 06, 2004 8:00 am
Secretary of State

08-06-2004 90003 002 ***150.00

DOCUMENT # P03000040388	
1. Entity Name AMERICAN VALET TRASH, INC.	

Principal Place of Business 3519 TABERNACLE PLACE TAMPA, FL 33607	Mailing Address 3519 TABERNACLE PLACE TAMPA, FL 33607
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54067249

2. Principal Place of Business 2317 Burgundy Terrace Suite, Apt. #, etc.	3. Mailing Address 2317 Burgundy Terrace Suite, Apt. #, etc.
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08032004 Chg-P CR2E034 (10/03)

City & State St. Petersburg, FL	City & State St. Petersburg, FL
Zip 33714	Zip 33714
Country USA	Country USA

4. FEI Number 45-0513536	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PURTILL, TYLER J 3519 TABERNACLE PLACE TAMPA, FL 33607	
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7. Name and Address of New Registered Agent Name Tyler J. Purtill Street Address (P.O. Box Number is Not Acceptable) 2317 Burgundy Terrace City St. Petersburg FL Zip Code 33714	
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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 **Tyler J. Purtill** **President** **8/2/04**
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
Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> Delete
NAME PURTILL, TYLER J	
STREET ADDRESS 3519 TABERNACLE PLACE	
CITY-ST-ZIP TAMPA, FL 33607	
TITLE VD	<input type="checkbox"/> Delete
NAME YODER, JEREMY M	
STREET ADDRESS 3519 TABERNACLE PLACE	
CITY-ST-ZIP TAMPA, FL 33607	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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: **Tyler J. Purtill** **Tyler J. Purtill** **8/2/04** **(727) 522-1292**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #