

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055873

FILED  
Apr 24, 2004  
Secretary of State

**Entity Name:** CHRIS'S PORTABLE TOILETS, INC.

**Current Principal Place of Business:**

P.O. BOX 3389  
RIVERVIEW, FL 335683389 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3389  
RIVERVIEW, FL 335683389 US

**New Mailing Address:**

**FEI Number:** 65-1188316

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOFFMAN, CHRIS  
6404 U.S. HIGHWAY 301 SOUTH  
RIVERVIEW, FL 33569 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P,D ( ) Delete  
Name: HOFFMAN, CHRIS  
Address: P.O. BOX 3389  
City-St-Zip: RIVERVIEW, FL 335683389 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** CHRIS HOFFMAN

P,D

04/24/2004

Electronic Signature of Signing Officer or Director

Date