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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076158 (2)

CORAL WAY SEPTIC TANK & DRAINAGE, INC.

FILED Mar 27 1997 8:00am Secretary of State



Principal Place of Business 7840 SW 22 ST MIAMI FL 33155		Mailing Address 7840 SW 22 ST MIAMI FL 33155-6514			1 1011001 NA 1841 0101) 01111 02111 10111 10210 2140 11001 2140 1511 1021				
						3. Date Incorporated or Qualified 10/14/1994		of Last F 1/1996	Report
2. Principal Fig	ace of Business	2a. Mailing Addre	ss			4. FEI Number	<u> </u>	A	oplied For
21		26				65-0535538			ot Applicable
Suite, Apt #	t, etc	Suite, Apt #, (etc.			5. Certificate of Status Desired			Additional equired
City & State	,	City & State		···-		6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			to Fees
Zipi	Country	Zip	C	ountry		8. This corporation has liability for it	ntangible t	ax under s	199.032,
24	25	29	30			Florida Statutes	Yes 🗌	No	
	9, Name and Address of Cure	ent Registered Agent		Ţ		10, Name and Address of New Meg	istered A	gent	
GAR	CIA, ROBERTO R			81	Name	1			
	SW 22 ST			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
MIAN	AI FL 33155								
				83					
				84	City			85 Zip	Code
						poration submits this statement for the p	<u>FL</u>		
SIGNATURE	rifamiliar with and accept the ob Signature, typed or probed came of registered					ired when reinstating)	DATE		
12.		AND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFIC			
Title	PSTD	DEI	.ETE 1.	1 TITLE	1		ι	Change	Addition
NAME	GARCIA, ROBERTO R		1.	2 NAME					
STREET ADDRESS	7840 SW 22 ST		1.	3 STREE	ADDRESS				
CHTY - ST - ZIP	MIAMI FL 33155			4 CITY-S	ST-ZIP				
TITLE		☐ DEI		1 TITLE	}			Change	Addition
NAME				2 NAME]				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		L DEI		4 CITY -	ST-ZIP		7	Change	Addition
TITLE		L.J UCI		1 TITLE			r., L	Grange	L) Addition
NAME CARCLA ADDOCUCE				2 NAME	1 1000000				
STREET ADORESS CITY-ST-ZIP				3 STARE 4. CITY -	ADDRESS				
TITLE		DEI		1 TITLE	51-217			Change	Addition
NAME				2 NAME			-		
STREET ADDRESS					ADDRESS				
City- St - 7-2				4 CITY-S	1				
10tF	11 (11 (17) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ DEI		1 TITLE			[Change	Addition
NAME			i i	2 NAME	1				
STREET ADDRESS			5.	3 STREE	ADDRESS				
City S1-2iP			3	4 CiTY-!					
TITLE		☐ DE	LETE 6.	1 TITLE			l	Change	Addition
NAME			6.	2 NAME					
STREET ADDRESS			6	3 STREE	F ADDRESS				
City+St-ZIP			6.	4 CITY -	ST-ZIP				
		the state of the s				17 A 2 440 07(0)(2) #2 11 A			

I do 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 corpection or the receiver or trusted efficiency of the corpection or the receiver or trusted efficiency.