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

CORPORATION ANNUAL REPORT 1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500001890 (9)

E'S CUSTOM EXCAVATING, INC.

Principal Place of Business Mailing Address

FILED Feb 05 1998 8:00am Secretary of State



8953 EHERN CI LAND O'LAKES		8953 EHEÄN CUTOFF LAND O'LAKES FL 34639				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified	
•							01/09/1995	
2. Principal Pla	ce of Business	2a. Mailing A	. Mailing Address				4. FEI Number Applied	For
21		26	26				59-3287830 Not App	
Suite, Apt. #	, etc.	Suite, Ap	Suite, Apt. #, etc.				\$8.75 Additi	onal
22		27	27				5. Certificate of Status Desired Fee Require	
City & State		City & St	City & State				6. Election Campaign Financing \$5.00 May	Be
23		28					Trust Fund Contribution	es
Zip	Country Zip Cou				untry 8. This corporation owes or has paid the current year Intangible			
24	25 29 30				Personal Property Tax due June 30. 🔀 Yes 🔲 No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
BLANKENSHIP, DARWIN E					81	Name		
8953		8		82	Street Add	Street Address (P.O. Box Number is Not Acceptable)		
LANI								
					83			
				Ī	84	City	FL 85 Zip Code	
11 Purchase to the provisions of Scotlage 607 0503 and 607 1509 Elevide Statutes the show						-named cor	·	Ísterad
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								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AN		(,,,,,	13.	-Plo	iit aignatura raqu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12 - [
TITLE	P		DELETE	1,1 100	LE			Addition
NAME	BLANKENSHIP, DARWIN E	_		1.2 NA		1		1
					1.3 STREET ADDRESS			
CITY-ST-ZIP	1 11 D AU 11 DA PL A 100 D				1.4 CITY-ST-ZIP			
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NAME	DI MAINENCHIA ANITO	_	•	2.2 NA			The state of the s	
STREET ATTIRESS ROSS EHREN CUTOFF						ADDRESS		
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				1		ADDRESS		-
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STREET ADDRESS						ADDRESS	•	
CITY-ST-ZIP TITLE			DELETE	5.4 CIT 6.1 TITI		1 - ZIP	Change	Addition
1		_					Clarige L.	, addition
NAME				6.2 NAI	-			-
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP 14. 1 hereby certify that the information supplied with this filling does not qualify for the					6.4 CITY-ST-ZIP		Section 119 07/3VII Florida Statuton I further control that the inform	mation
in increasy ce	rury man trie miormation supplied w	in all and coes	not quanty t	or line exer	nipit	na i siateu II	TOGGIOTI TOTO (O)(I), FIORIZA SIGNICES. FIGURES CERTIFY (RELITED INCOME.	HOUGH