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

Mailing Address

SUITE 5

4850 S.W. 26TH AVE.

2a. Mailing Address

ned, or on an attachment with an address

FORT LAUDERDALE FL 33312-5937

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

FORT LAUDERDALE FL 33312

2. Principal Place of Business

4850 S.W. 26TH AVE.

SUITE 5



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

3. Date Incorporated or Qualified

05/22/1996

4. FEI Number

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600045626 (4)

SOUTHERN SEPTIC COMPANY

appears in Block 12 or Block 13 if char

SIGNATURE:

Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Country Zip Yes 🔲 No 25 30 Florida Statutes 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GAGNE, FRANCE ance 4850 S.W. 28TH AVE. ot Acceptable) 82 ss (P.O. Box Numbe SUITE 5 83 FORT LAUDERDALE FL 33312 84 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 regulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE THILE 210 SW 44 th ave GAGNE, FRANCE 1.2 NAME NAME 4850 S.W. 26TH AVE. Plantation, FI, 33317 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 1.4 CITY-ST-ZIP CITY - ST-ZIP Change Addition DELETE 2.1 TITLE THE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CHY-SI-Z0 DELETE ☐ Change ☐ Addition 3.1 TITLE TILLE 3.2 NAME NAME: 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP DITY-ST-7(P DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP DiffY-ST-7IP Addition DELETE \_\_\_ Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP C(1) - S1 - Z(F Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP CITY - ST - ZIE 14. 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 suppliemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name