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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # P96000097144

SUPREME SEPTIC AND DRAIN, INC.

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90065 014 ***150.00

Principal Place of Business		Mailing Address				I IMBIIMBII IIM IMIIM MIIII MAIII MAIII MAIII	18111 8 8118 18111 1EEST 11	E)(9/5) E)E) 10("
15040 JACKSON STREET MIAMI FL 33176		15040 JACKSON STREET MIAMI FL 33176							
						DO NOT WRITE IN THIS SPACE			
					⊢	3. Date Incorporated or Qualifed	IN THIS STACE		
						01/01/1997			-
a Principal Di	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21 21	lace of business	26				65-0712274	<u> </u>	Not Applicab	le
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.7	5 Additional	
22	.,	27				5. Certificate of Status Desired	Fee	Required	
City & State	e	City & State				6. Election Campaign Financing	¬ \$5.0	0 May Be	
23		28				Trust Fund Contribution	Adde	d to Fees	
Zip	Country	Zip	Co	untry		8. This corporation owes the current	t year Intangible		
24	25	29	30			Personal Property Tax.	☐ Yes	No No	
	9. Name and Address of Curr	ent Registered Agent		ļ		Name and Address of New Reg	istered Agent		
0.50	D.O. O. 10770			81 Name	!				
	DIS, CURTIS			82 Stree	Address	(P.O. Box Number is Not Acceptable	e)		
	O JACKSON STREET								
MIAN	AI FL 33176			83					
				84 City		- Andrews	85 Z	ip Code	\dashv
				1 1			FL °°		
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida S	tatutes, the a	above-named	l corporation's	ion submits this statement for the pu board of directors. I hereby accept to	rpose of changing he appointment as	its registered registered	' }
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505	, Florida Sta	tutes.		, ,	• • •	_	
SIGNATURE									Į.
SIGNATURE							DATE		í.
	Signature, typed or printed name of registered a		(NOTE Registere		required who		DATE	TODS IN 12	⊣ á
12.	OFFICERS /	AND DIRECTORS	13.		required who	en reinstating) ADDITIONS/CHANGES TO OFFICE			tion (a)
12.	OFFICERS :		13. E 1.11	TITLE	required who		CERS AND DIREC		
12. TITLE NAME	P GEDDIS, CURTIS	AND DIRECTORS	13. E 1.1 T	TITLE VAME			CERS AND DIREC		
12. TITLE NAME STREET ADDRESS	P GEDDIS, CURTIS 15040 JACKSON ST	AND DIRECTORS	13. E 1.11 1.24 1.35	TITLE NAME STREET ADDRESS			CERS AND DIREC		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176	AND DIRECTORS	13. E 1.11 1.2 M 1.3 S 1.4 C	TITLE NAME STREET ADDRESS CITY-ST-ZIP			CERS AND DIREC	ge 🗌 Addi	tion (11
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP	AND DIRECTORS	13. E 1.1 T 1.2 M 1.3 S 1.4 C E 2.1 T	TITLE NAME STREET ADDRESS CITY-ST-ZIP			CERS AND DIREC	ge 🗌 Addi	tion (11
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY	AND DIRECTORS	13. E 1.11 1.2 h 1.3 s 1.4 c E 2.11 2.2 h	. TITLE NAME ETREET ADDRESS CITY-ST-ZIP TITLE NAME			CERS AND DIREC	ge 🗌 Addi	tion (11
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS	13. E 1.11 1.2 h 1.3 s 1.4 C E 2.11 2.2 h	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			CERS AND DIREC	ge 🗌 Addi	tion (11
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY	AND DIRECTORS	13. E 1.11 1.2	ITTLE VAME STREET ADDRESS TITLE VAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP			CERS AND DIREC	ge ∏Addi	tion COO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET	13. E 1.11 1.2	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			CERS AND DIREC	ge ∏Addi	tion COO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET	13. E 1.11 1.2	ITTLE VAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET			CERS AND DIREC	ge ∏Addi	tion COO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET	13. E 1.11 1.2 h 1.3 s 1.4 c E 2.11 2.2 h 2.3 s 2.4 l E 3.11 3.2 h 3.3 s	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			CERS AND DIREC	ge ∏Addi	tion COO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET	13. E 1.11 1.2	ITTLE VAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET			CERS AND DIREC	ge ∏Addi	tion C
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET DELET	133 1.40 2.11 2.21 2.21 2.21 3.11 3.24 3.35 3.4.1 E 4.11	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP			CERS AND DIREC	ge ∏Addi	tion C
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET DELET	13.8 1.40 1.38 1.40 1.21 2.21 2.21 2.38 2.41 3.31 3.34 4.11 4.21	TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE NAME			CERS AND DIREC	ge ∏Addi	tion C
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET DELET	E 1.11 1.26 1.38 1.40 E 2.11 2.26 2.38 2.44 E 3.11 3.26 3.34 E 4.11 4.26 4.38	TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS STREET ADDRESS STREET ADDRESS			CERS AND DIREC	ge ∏Addi	tion C
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET DELET	E 1.11 1.26 1.38 1.40 E 2.11 2.26 2.38 2.44 E 3.11 3.27 E 4.11 4.21 4.38 4.40	TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE NAME			CERS AND DIREC	ge ∏Addi ge ∏Addi ge ∏Addi	tion Continue to the continue
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST	AND DIRECTORS DELET DELET	E 1.11 1.28 1.38 1.40 2.11 2.28 2.38 2.44 E 3.11 3.28 3.4.1 E 4.11 4.21 4.38 4.40 (E 5.11	TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP			CERS AND DIREC	ge ∏Addi ge ∏Addi ge ∏Addi	tion Continue to the continue
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST MIAMI FL 33176	AND DIRECTORS DELET DELET	E 1.11 1.28 1.38 1.40 2.11 2.28 2.38 2.44 E 3.11 3.28 3.4.1 E 4.11 4.21 4.38 4.40 (E 5.11 5.28	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			CERS AND DIREC	ge ∏Addi ge ∏Addi ge ∏Addi	tion Continue to the continue
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST MIAMI FL 33176	AND DIRECTORS DELET DELET	E 1.11 1.28 1.38 1.40 2.11 2.28 2.38 2.44 E 3.11 3.28 3.4.1 E 4.11 4.22 4.38 4.40 (E 5.11 5.22 5.33	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			CERS AND DIREC	ge ∏Addi ge ∏Addi ge ∏Addi	tion Continue to the continue
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST MIAMI FL 33176	AND DIRECTORS DELET DELET	E 1.11 1.28 1.38 1.40 2.11 2.28 2.38 2.41 E 3.11 3.28 3.4.1 E 4.11 4.22 4.38 4.40 (E 5.11 5.22 5.33 5.44	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			CERS AND DIREC	ge	tion Contion
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST MIAMI FL 33176	AND DIRECTORS DELET DELET DELET DELET	13.8 1.4C 1.3.8 1.4C 2.11 2.2h 2.38 2.41 2.38 3.4.1 2.4.1 4.2.4 4.3.8 4.4C 6.11 5.2) 5.33 5.4(6.10 6.11	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP			CERS AND DIREC	ge	tion Contion
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P GEDDIS, CURTIS 15040 JACKSON ST MIAMI FL 33176 VP GEDDIS, SHIRLEY 15040 JACKSON ST MIAMI FL 33176	AND DIRECTORS DELET DELET DELET DELET	E 1.11 1.28 1.38 1.40 1.38 1.40 2.11 2.24 2.38 2.44 1.4 2.33 3.4.4 4.2 4.38 4.40 1.5 2.1 5.38 5.40 1.6 1.6 1.6 1.6 1.6 1.6 1.6 1.6 1.6 1.6	TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS CITY- ST- ZIP TITLE			CERS AND DIREC	ge	tion Contion

14. 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 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Custos SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PROPERTY DAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)