SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED Jul 29 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000039761 (6) ENVIRONMENTAL SEPTIC PUMPING, INC. Principal Place of Business Mailing Address 30412 5TH AVENUE 30412 5TH AVENUE BIG PINE KEY FL 33043 BIG PINE KEY FL 33043 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WERLING, EDWARD 30412 **\$**TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) BIG PINE KEY FL 33043 83 84 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent alguature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE 1.1 TITLE DELETE Change Addition WERLING, EDWARD NAME 1.2 NAME 23098 SAILFISH LANE 1.3 STREET ADDRESS STREET ADDRESS **CUDJOE KEY FL 33042** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE __ DELETE Change Addition TUCKER, DAVID 2.2 NAME NAME 30412 5TH AVENUE 2.3 STREET ADDRESS STREET ADDRESS BIQ PINE KEY FL 33043 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3 1 TITLE Change DELETE Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF TITLE 5.1 TITLE ___ DELETE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF TITLE 6 1 TITLE DELETE [__] Change ____ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 application of 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 application of the receiver of the chapter 607.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

OHIG

(2/38)CR2E034