

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000017594

FILED
Feb 05, 2004
Secretary of State

Entity Name: MEDICAL WASTE CONSULTANTS INC.

Current Principal Place of Business:

107 HARBOR BLUFF DRIVE
BELLEAIR BLUFFS, FL 337702655

New Principal Place of Business:

Current Mailing Address:

P O BOX 1248
LARGO, FL 33779

New Mailing Address:

FEI Number: 59-3703055 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RODRIGUEZ, ARGELIO E JR
107 HARBOR BLUFF DRIVE
BELLEAIR BLUFFS, FL 33770

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: RODRIGUEZ, ARGELIO E JR
Address: 107 HARBOR BLUFF DRIVE
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: STCF () Delete
Name: RODRIGUEZ CHANDLER, SHERRY
Address: 107 HARBOR BLUFF DRIVE
City-St-Zip: LARGO, FL 33770

Title: COO (X) Delete
Name: BENETATOS, PHILIP D
Address: P.O. BOX 1248
City-St-Zip: LARGO, FL 33779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERRY CHANDLER-RODRIGUEZ

CFO

02/05/2004

Electronic Signature of Signing Officer or Director

_____ Date