


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000070773
 1. Entity Name
WEBER ENVIRONMENTAL SERVICES INC.



Principal Place of Business Mailing Address
5935 ST ROAD 542 W **5935 ST ROAD 542 W**
WINTER HAVEN, FL 33880-5128 US **WINTER HAVEN, FL 33880-5128 US**



01302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-3336865 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
WEBER, KENNETH M
521 - 20TH ST. SW
WINTER HAVEN, FL 33880

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *KENNETH M. WEBER* DATE *1/30/06*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000473908
 04/04/06-80002-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WEBER, KENNETH
STREET ADDRESS	5935 ST ROAD 542 W
CITY-ST-ZIP	WINTER HAVEN, FL 338805128
TITLE	VP
NAME	WEBER, DONNA
STREET ADDRESS	5935 ST ROAD 542 W
CITY-ST-ZIP	WINTER HAVEN, FL 338805128
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *KENNETH M. WEBER* DATE *1-30-06* DAYTIME PHONE # *863-551-1820*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #