

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

FILED

May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000093282 (7)

1. Corporation Name
WEST LAS OLAS WASTE CONTROL, INC.



Principal Place of Business
ONE FINANCIAL PLAZA STE 2626
FORT LAUDERDALE FL 33394

Mailing Address
ONE FINANCIAL PLAZA STE 2626
FORT LAUDERDALE FL 33394-1300

3. Date Incorporated or Qualified 11/13/1996
3a. Date of Last Report

2. Principal Place of Business
21 115 N.W. 2nd Avenue
Suite, Apt #, etc.
22 City & State Fort Lauderdale, FL
23 Zip 33311
24 Country
25
26 115 N.W. 2nd Avenue
Suite, Apt #, etc.
27 City & State Fort Lauderdale, FL
28 Zip 33311
29 Country
30

4. FEI Number Applied For
 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
WORLDWIDE CORPORATE SERVICES, INC.
ONE FINANCIAL PLAZA STE 2626
FT LAUDERDALE FL 33394

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE P, S, D
NAME C. CRAIG EDEWAARD
STREET ADDRESS 115 N.W. 2nd Avenue
CITY - ST - ZIP Fort Lauderdale, FL 33311
 DELETE
TITLE VP
NAME STEPHEN F. GOLDENBERG
STREET ADDRESS One Financial Plaza
Suite 2626
CITY - ST - ZIP Fort Lauderdale, FL 33394
 DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
 DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
 DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
 DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

405/8/97

200002182502
-05/19/97--01031--019
***165.00

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 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.

SIGNATURE: _____ DATE 4/30/97 DAYTIME PHONE # (954) 523-2626
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)