

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000024477

**FILED
Jan 14, 2007
Secretary of State**

Entity Name: INNOVATIVE WASTE CONTROL, INC.

Current Principal Place of Business:

434 MEADOW RIDGE DR.
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15277
TALLAHASSEE, FL 323175277

New Mailing Address:

FEI Number: 59-3498352 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHAMLIS, KAREN C
434 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312 US

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: P () Delete
Name: CHAMLIS, MARK
Address: 434 MEADOWRIDGE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: CHAMLIS, ELBERT
Address: 5745 VETERANS MEMORIAL DR
City-St-Zip: TALLAHASSEE, FL 32308

Title: ST () Delete
Name: CHAMLIS, KAREN C
Address: 434 MEADOW RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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 Chapter 119, 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: MARK L. CHAMLIS

P

01/14/2007

Electronic Signature of Signing Officer or Director

_____ Date