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CORPORATION ANNUAL REPORT

1999°



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90002 029 ***150.00

DOCUMENT # 323131

NATIONAL SOLID WASTE INSTITUTE INC

WATTOTAL GOLD WA	OIL MOTTOIL, MO			 		
	<u> </u>					
Principal Place of Business	Mailing A	ddress				
4815 E BUSH BLVD	. PO BOX 1				.*	
STE 208F TAMPA FL 33617	SUITE 204 Tampa Fi	, . 33687-9933		DO NOT WRITE IN	THIS SPACE .	
US	US	, 00007 0000		3. Date Incorporated or Qualifed		
				11/15/1967		
2. Principal Place of Business	2a. Mailin	g Address		4. FEI Number	App	lied For
21	26	<u></u>	<u> </u>	59-1196821	= Not	Applicable
Suite, Apt. #, etc.	Suite,	Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
22	27				Fee Rec	<u> </u>
City & State	— — — — — — — — — — — — — — — — — — —	State		6. Election Campaign Financing	\$5.00 \	
Zip C	Country Zip	Count	tru	Trust Fund Contribution	Added to	Fees
24 25	29	30		This corporation owes the current year Personal Property Tax.		□No
	Address of Current Registered A			10. Name and Address of New Registe		
	1 Paris - 2 - 3		31 Name			<u> </u>
EICHHOLZ, GERHAF	RDC	ļ.,	32 Street Add	(DO 0 North 1		·
10415 N. 46TH ST.	an against ac	١٩	Street Addi	ress (P.O. Box Number is Not Acceptable)		
TAMPA FL 33617			33	THE REAL PROPERTY OF THE REAL	21. 10.011.1011	(S S S
			34 City	· · · · · · · · · · · · · · · · · · ·	85 Zip C	21 2 21 PG
Letter 1 de N. Bir V.			City		FL 85 Zip Co	ode
	of Cartiana 607 0502 and 607 1509	8 Florida Statutes, the aby	ove-named corp	poration submits this statement for the purpos	se of changing its r	
11. Pursuant to the provisions of	- both in the State of Florida Cool	o, monua Statutes, life abt				egistered
11. Pursuant to the provisions of office or registered agent, of the agent. I am familiar with, an	r both, in the State of Florida Suci d accept the obligations of Section	b change was authorized to 607:050% Florida Statut	by the corporation	on's board of directors. I hereby accept the a	appointment as regi	egistered
11. Pursuant to the provisions of office or registered agent, of the agent. I am familiar with, an SIGNATURE	had 2	who 6	icrhand	. C. EXHHOLE 1	-10 -99	egistered istered
SIGNATURE Signature Signature Signature	of name of registered agent and title if applicable	Ie. (NOTE: Registered A	icrhand	d when reinstating) DAT	-10-99 FE	
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indicated on this annual report or supplied with this inling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes. Florida Statutes, and that my name appears in Block 12 or Block 13 if changes.