2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB 18 PM 3:44

DOCUMENT # A99000001021

1. Entity Name
SOUTHERN WASTE SYSTEMS, LTD.

Principal Place of Business	Mailing Address
790 HILLBRATH DRIVE LANTANA, FL 33462	790 HILLBRATH DRIVE LANTANA, FL 33462
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

01142004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0931538 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WHITE, WILTON L. ESQ. 625 NORTH FLAGLER DRIVE, 9TH FLOOR WEST PALM BEACH, FL 33401	Name GUSMANO, CHARLES Street Address (P.O. Box Number is Not Acceptable) 790 Hillbrath Drive City LANTANA FL Zip Code 33462

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 [signature] 2/12/04
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. $2,000.00

10. Amount of Capital Contributions in FLORIDA to date.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P00000010352	STREET ADDRESS	
NAME	BCA HOLDING CORP.		
STREET ADDRESS	790 HILLBRATH DRIVE	CITY-ST-ZIP	
CITY-ST-ZIP	LANTANA, FL 33462		
DOCUMENT #		STREET ADDRESS	000030005690
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STAPLE CHECK HERE

14. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: [signature] 2/12/04 561-582-6688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #