2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005044

Entity Name: VEOLIA ENVIROMENTAL SERVICES NORTH AMERICA CORP.

FILED Feb 10, 2009 Secretary of State

Current Pri	incipal Place	of Business:	New Princ	New Principal Place of Business:			
200 E. RAN SUITE 7900 CHICAGO,		S					
Current Mailing Address:			New Maili	New Mailing Address:			
6990 NW 9 BUILDING S MIAMI, FL	5						
FEI Number:	36-4394814	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status D	esired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of N	lew Registered Age	nt:	
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324						
The above in the State		ubmits this statement for the pu	rpose of changing it	ts registered o	ffice or registered ag	ent, or both,	
SIGNATUR							
	Electronic	Signature of Registered Agen	t		Date		
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS	AND DIRECT	ORS:	ADDITION	S/CHANGES	TO OFFICERS AND	DIRECTORS:	
Title: Name: Address: City-St-Zip:	FARR, GEORGE	PH ST., SUITE 7900	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	GOURVENNEC,	PH ST. SUITE 7900	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	GASQUET, DENI	PH ST. SUITE 7900	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	PROGLIO, HENF	PH ST. SUITE 7900	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	RICHARD, STEP	PH ST. SUITE 7900	Title: Name: Address: City-St-Zip:	AS (X) CRISTINA, CON 6990 NW 97TH MIAMI, FL 331	AVE., BLDG. 5		
Title: Name: Address: City-St-Zip:	AS (X) CONDE, CRISTII 6990 NW 97 AVE MIAMI, FL 3317	E., # 5	Title: Name: Address: City-St-Zip:	()	Change () Addition		

I hereby certify that the information supplied with this filing does not qualify 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: CRISTINA CONDE AS 02/10/2009