## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000006058

FILED Feb 05, 2004 Secretary of State

Entity Name: TRIMAX RESIDUALS MANAGEMENT (USA), INC.

**Current Principal Place of Business:** New Principal Place of Business: 9440-60TH AVENUE 9440-60TH AVENUE EDMONTON ALBERTA, T6EOC CA EDMONTON, AB T6EOC CN **Current Mailing Address: New Mailing Address:** 10000 SAGEMORE DRIVE, SUITE 10101 MARLTON, NJ 08053 FEI Number: 98-0183794 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 526 EAST PARK AVENUE US TALLAHASSEE, FL 32301 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition MAXWELL, TOM MAXWELL, TOM Name: Name: 9440-60TH AVENUE 9440-60TH AVENUE Address: Address: EDMONTON, AB T6E O61 CN City-St-Zip: EDMONTON, AB CANADA, T6E 0C1 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition VAN BRUNT, ROBERT Name: VANBURNT, ROBERT Name: 10000 SAGEMORE DR, SUITE 10101 10000 SAGEMORE DR, SUITE 10101 Address: Address: MARLTON, NJ 08053 US City-St-Zip: MARLTON, NJ 08053 City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition VSD VPSD EISENSTADT, WILLIAM B EISENSTADT, WILLIAM B Name: Name: 10000 SAGEMORE DR, SUITE 10101 10000 SAGEMORE DR. SUITE 10101 Address: Address: City-St-Zip: MARLTON, NJ 08053 City-St-Zip: MARLTON, NJ 08053 US Title: () Delete Title: VPD (X) Change ( ) Addition CARRASCO, JORGE LYNCH, WALTER Name: Name: Address: 10000 SAGEMORE DR, SUITE 10101 Address: 10000 SAGEMORE DR, SUITE 10101 City-St-Zip: City-St-Zip: MARLTON, NJ 08053 MARLTON, NJ 08053 US Title: VD (X) Delete Title: () Change () Addition SMITH, R. LAIRD Name: Name: 10000 SAGEMORE DR. SUITE 10101 Address: Address: City-St-Zip: MARLTON, NJ 08053 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM B. EISENSTADT VPSD 02/05/2004