

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006058

FILED
Feb 24, 2005
Secretary of State

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

Current Principal Place of Business:

9440-60TH AVENUE
EDMONTON, AB T6E0C CN

New Principal Place of Business:

Current Mailing Address:

1025 LAUREL OAK DR
VOORHEES, NJ 08043

New Mailing Address:

1025 LAUREL OAK ROAD
VOORHEES, NJ 08043

FEI Number: 98-0183794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: MAXWELL, TOM
Address: 9440-60TH AVENUE
City-St-Zip: EDMONTON, AB T6E 061 CN

Title: VPTD () Delete
Name: VAN BRUNT, ROBERT
Address: 10000 SAGEMORE DR, SUITE 10101
City-St-Zip: MARLTON, NJ 08053 US

Title: VPSD () Delete
Name: EISENSTADT, WILLIAM B
Address: 10000 SAGEMORE DR, SUITE 10101
City-St-Zip: MARLTON, NJ 08053 US

Title: VPD (X) Delete
Name: LYNCH, WALTER
Address: 10000 SAGEMORE DR, SUITE 10101
City-St-Zip: MARLTON, NJ 08053 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WOOD, GRAHAM
Address: 1025 LAUREL OAK ROAD
City-St-Zip: VOORHEES, NJ 08043

Title: VT (X) Change () Addition
Name: KOCHANSKI, GERALD
Address: 1025 LAUREL OAK ROAD
City-St-Zip: VOORHEES, NJ 08043

Title: VSD (X) Change () Addition
Name: EISENSTADT, WILLIAM B
Address: 1025 LAUREL OAK ROAD
City-St-Zip: VOORHEES, NJ 08043

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 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

VS

02/24/2005

Electronic Signature of Signing Officer or Director

Date