2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006058

Name:

Address:

City-St-Zip:

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

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
9440-60TH AVENUE EDMONTON, AB T6EOC				1025 LAUREL OAK ROAD VOORHEES, NJ 08043 US		
Current M	lailing Addres	ss:	New Mailing Address:			
1025 LAUREL OAK ROAD VOORHEES, NJ 08043			1025 LAUREL OAK ROAD VOORHEES, NJ 08043 US			
FEI Number	: 98-0183794	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
SUITE 4 WESTON, The above	CUTIVE PARK FL 33331 Us named entity of Florida.	3	purpose of changing i	ts registered c	office or registered agent, or both,	
SIGNATU						
SIGNATOR		nic Signature of Registered Ag	jent	Date		
Election Car		g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PD (WOOD, GRAH, 1025 LAUREL VOORHEES, N	OAK ROAD	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	VT (KOCHANSKI, O 1025 LAUREL VOORHEES, N	OAK ROAD	Title: Name: Address: City-St-Zip:	VPT (X KOCHANSKI, G 1025 LAUREL (VOORHEES, N	OAK ROAD	
Title: Name: Address: City-St-Zip:	VSD (EISENSTADT, 1025 LAUREL VOORHEES, N	OAK ROAD	Title: Name: Address: City-St-Zip:	VPSD (X EISENSTADT, 1 1025 LAUREL 1 VOORHEES, N	OAK ROAD	
Title:	() Delete	Title:	VP () Change (X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

WEATHERS, RICHARD

HOUSTON, TX 77073 US

1820 CANDLE RIDGE PARK DRIVE

SIGNATURE: WILLIAM B. EISENSTADT VPSD 04/11/2006