

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 2000



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Apr 20, 2000 8:00 am Secretary of State

04-20-2000 90087 010 \*\*\*150.00

DOCUMENT #

F98000000262

1. Corporation Name

OGDEN WASTE SOLUTIONS, INC.

00000000

Principal Place of Business

40 LANE ROAD FAIRFIELD NJ 07007-2615

Mailing Address

40 LANE ROAD FAIRFIELD NJ 07007-2615

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified DECEMBER 22, 1997

4. FEI Number 22-3557169 Applied For Not Applicable

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

6. Election Campaign Financing \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

2. Principal Place of Business

2a. Mailing Address

26

27

28

29

30

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY USA 1201 HAYS STREET TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT/DIRECTOR DELETE

1.1 TITLE Change Addition

NAME SCOTT G. MACKIN

1.2 NAME

STREET ADDRESS 2 PENN PLAZA

1.3 STREET ADDRESS

CITY-ST-ZIP NEW YORK NY 10121-0032

1.4 CITY-ST-ZIP

TITLE EVP DELETE

2.1 TITLE Change Addition

NAME BRUCE W. STONE

2.2 NAME

STREET ADDRESS 40 LANE ROAD

2.3 STREET ADDRESS

CITY-ST-ZIP FAIRFIELD NJ 07007-2615

2.4 CITY-ST-ZIP

TITLE TREASURER DELETE

3.1 TITLE Change Addition

NAME WILLIAM E. WHITMAN

3.2 NAME

STREET ADDRESS 40 LANE ROAD

3.3 STREET ADDRESS

CITY-ST-ZIP FAIRFIELD NJ 07007-2615

3.4 CITY-ST-ZIP

TITLE SECRETARY DELETE

4.1 TITLE Change Addition

NAME JEFFREY R. HOROWITZ

4.2 NAME

STREET ADDRESS 40 LANE ROAD

4.3 STREET ADDRESS

CITY-ST-ZIP FAIRFIELD NJ 07007-2615

4.4 CITY-ST-ZIP

TITLE ASSISTANT SECRETARY DELETE

5.1 TITLE Change Addition

NAME J.L. EFFINGER

5.2 NAME

STREET ADDRESS 2 PENN PLAZA

5.3 STREET ADDRESS

CITY-ST-ZIP NEW YORK NY 10121-0032

5.4 CITY-ST-ZIP

TITLE DELETE

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/00 Date

(212) 868-6000 Daytime Phone #

CR2E034 (11/98)