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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G74590

1. Corporation Name

PASQUALE WASTE SERVICES, INC.

_			
Principal	Place	of	Business

1374 WEST 69TH STREET

Mailing Address

1378 W 69TH ST

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90047 028 ***158.75



HALEAH FL 33014		US				DO NOT WRITE IN THIS SPACE						
	03					3. Date Incorporated or Qualifed						1
					10/28/1983							ļ
2. Principal Place	e of Business	2a. Mailing Address				4. FEI Number				TĀ	pplied For	1
3762		26 3762 Spring	Cre	x+ Ct	٠. ا	59-23	79104			⊢ -∔	ot Applicable	1
Suite, Apt. #,		Suite, Apt, #, etc.	<u>~!.</u>	<u>.31 </u>	, – –						Additional	1
	O.O.	27			ļ	5. Certifca	te of Sta	itus Desired	严		equired	
City & State		City & State				& Election	Campa	ign Financin		\$5.00	-May Be- ∽	1
. 1	Laborth FL						and Conf	-	* □		to Fees	
Zip	Country	Zip	Cour	ntry		8 This co	poration	owes the cu	urrent year In:	tangible		1
: 334 <i>4</i>		29 33467 30	1 (ISA	J		al Proper		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	□No	
	9. Name and Address of Current F		<u>'</u>	<u> </u>					Registered	Agent		1
81 Name : 7												
PASQL	JALE, FRANCIS		ļ			sgual		ranc				ł
1374 WEST 69TH STREET				82 Street	Address			is Not Accep	ptable			İ
	AH FL 33014		-	83	<i>) /(0</i> 0	1.5pc	urkz.	CLEST	<u> </u>		*	1
	=							_				
			Ī	84 City	ali	0 117	المحم		FL		Code]
		1 007 4500 EL 11 Otal 41		<u> </u>	-ak		OF TV	tomost for th			467	}
 office or regi 	the provisions of Sections 607.0502 a stered agent, or both, in the State of	Florida. Such change was auth	orized	by the corp	corpora oration's	s board of d	s this sta irectors.	I hereby acc	ept the appo	intment as r	egistered	Ì
agent. I am i	familiar with, and accept the obligatio	ns of, Section 607.0505, Florida	Statu	ites.								
SIGNATURE												ļ
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requ				required wh	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
12.	OFFICERS AND		13.		Pi	7				Change	Addition	1 5
ا ا	D	☐ DELÉTE	1.1 TITI		15.	count	- F	ranci's	•	Change		15
	PASQUALE, FRANCIS		1.2 NA		ra	SQUAN	_ \ 	March 1	aL.			8
	1374 West 69th St.		1.3 STI	REET ADDRESS	379	od Sh	ມນໍລ	Crest (~ 1"	_		ļ
CITY-ST-ZIP F	HALEAH FL		1.4 CIT	Y-ST-ZIP	Lak	ce vice	orth,	<u> </u>	33467			é L
TITLE	PD	☐ DELETE	2.1 TIT	LE	ĺ		•			Change	☐ Addition	1
VAME (Passauale Franci	s	2.2 NA	ME								1
TREET ADDRESS	134 TUES - 3762	Spring Crest CI	2.3 STF	REET ADDRESS				•				
CITY-ST-ZIP	Lake worth EL	. '33467	2.4 CT	TY-ST-ZIP	i _							
TITLE		[DELETE	3.1 TIT	LE					~	Change	Addition	
NAME			3.2 NA	ME								
STREET ADDRESS			3.3 STI	REET ADDRESS	}							}
CITY-ST-ZIP				TY-ST-ZIP	ĺ							
ITILE		☐ DELETE	4.1 TIT		 					☐ Change	Addition	1
NAME		_	4. 2 NA		-							ļ
STREET ADDRESS				REET ADDRESS								
				Y-ST-ZIP	İ							}
CITY-ST-ZIP		☐ DELETE	5.1 TIT		┼-~					Change	☐ Addition	1
TITLE			5.2 NA								_	
AME				REET ADDRESS	l					*]
STREET ADDRESS												
CITY-ST-ZIP		□ DELETE	6.1 TIT	Y-ST-ZIP	 -			<u></u>		Change	☐ Addition	} .
TITLE		☐ SETFIF								C change	LJ MOUNDIN	
NAME			6.2 NA									
STREET ADDRESS				REET ADDRESS	1							ĺ
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP]
							(01/1) F1		- 16			

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.