2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# J40686

Entity Name: WASTE PRO USA, INC.

Current Principal Place of Business:

2101 W SR 434
STE 315
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6862
LONGWOOD, FL 32791

New Mailing Address:

FEI Number: 59-2733978 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JENNINGS, W.C.
100 AMBERWOOD CT.
LONGWOOD, FL 32779 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: DOS ( ) Delete
Name: JENNINGS, JOHN J.,
Address: 100 AMBERWOOD CT.
City-St-Zip: LONGWOOD, FL

Title: D ( ) Delete
Name: MURRAY, FRANK J
Address: 3101 W 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769

Title: P ( ) Delete
Name: EWING, CHARLES
Address: 1022 MANCHESTER DR
City-St-Zip: WINTER PARK, FL 32792

Title: D ( ) Delete
Name: HYRES, ROBERT J
Address: 134 HICKORY RIDGE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOHN J JENNINGS DOS 04/28/2005

Electronic Signature of Signing Officer or Director Date