

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J40686

Entity Name: WASTE PRO USA, INC.

FILED
Jan 21, 2008
Secretary of State

Current Principal Place of Business:

2101 W SR 434
STE 315
LONGWOOD, FL 32779 US

Current Mailing Address:

P.O. BOX 7209
LONGWOOD, FL 32791

New Principal Place of Business:

2101 W SR 434
SUITE 315
LONGWOOD, FL 32779 US

New Mailing Address:

P.O. BOX 7209
LONGWOOD, FL 32791 US

FEI Number: 59-2733978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JENNINGS, W.C.
100 AMBERWOOD CT.
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

HYRES, ROBERT J EVP
2101 W SR 434
SUITE 315
LONGWOOD, FL 32779 US

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: ROBERT J. HYRES

01/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: JENNINGS, JOHN J
Address: 100 AMBERWOOD CT.
City-St-Zip: LONGWOOD, FL 32779 US

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

Title: CFO () Delete
Name: PHILLIPS, DON
Address: 1561 WESTOVER LOOP
City-St-Zip: HEATHROW, FL 32746

Title: SVP () Delete
Name: WOOD, FRED V
Address: 1306 LOOWIT FALLS WAY
City-St-Zip: BRASELTON, GA 30517

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVP (X) Change () Addition
Name: HYRES, ROBERT J
Address: 134 HICKORY RIDGE CIRCLE
City-St-Zip: LAKE MARY, FL 32746 US

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

Title: SVP (X) Change () Addition
Name: WOOD, FRED V
Address: 505 WESTMINSTER DRIVE
City-St-Zip: ATHENS, GA 30607

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

SIGNATURE: ROBERT J. HYRES

EVP

01/21/2008

Electronic Signature of Signing Officer or Director

Date