2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J40686

Address:

City-St-Zip:

505 WESTMINSTER DRIVE

ATHENS, GA 30607

Entity Name: WASTE PRO USA, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2101 W SR 434 SUITE 315 LONGWOOD, FL 32779 **New Mailing Address: Current Mailing Address:** P.O. BOX 7209 P.O. BOX 917209 LONGWOOD, FL 32791 US 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: 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition JENNINGS, JOHN J Name: Name: 100 AMBERWOOD CT. Address: Address: City-St-Zip: LONGWOOD, FL 32779 US City-St-Zip: () Delete Title: EVP Title: EVP (X) Change () Addition Name: HYRES, ROBERT J Name: HYRES, ROBERT J 134 HICKORY RIDGE CIRCLE 5227 ROYAL PADDOCK WAY Address: Address: LAKE MARY, FL 32746 US MERRITT ISLAND, FL 32953 US City-St-Zip: City-St-Zip: Title: Title: CFO () Delete () Change () Addition PHILLIPS, DON Name: Name: 1561 WESTOVER LOOP Address: Address: City-St-Zip: HEATHROW, FL 32746 City-St-Zip: Title: SVP () Delete Title: () Change () Addition WOOD, FRED V Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT J. HYRES EVP 01/14/2009