

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000008590

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** SAFEWASTE OF FLORIDA, LLC

**Current Principal Place of Business:**

20241 NE 15TH COURT  
N. MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3267  
HALLANDALE, FL 33008

**New Mailing Address:**

**FEI Number:** 03-0579467

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROMANO, ROBERT L  
3370 NE 190 STREET #2408  
AVENTURA, FL 33180 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ROMANO, ROBERT L  
**Address:** 3370 NE 190 STREET #2408  
**City-St-Zip:** AVENTURA, FL 33180

**Title:** SEC  
**Name:** ROMANO, SUSAN  
**Address:** 3370 NE 190 STREET #2408  
**City-St-Zip:** AVENTURA, FL 33180

**Title:** MGRM  
**Name:** ROMANO, ROBERT L JR  
**Address:** 3760 NW 84TH WAY  
**City-St-Zip:** COOPER CITY, FL 33024

**Title:** OFFM  
**Name:** ROMANO, MELISSA H  
**Address:** 3760 NW 84TH WAY  
**City-St-Zip:** COOPER CITY, FL 33024

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** ROBERT L ROMANO

MGRM

01/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date