## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000078884

Entity Name: WASTE CONTROL, LLC

3993 TYRONE BLVD, SUITE 608148

ST PETERSBURG, FL 33709

Address:

City-St-Zip:

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4024 DOCTOR LOVE RD ORLANDO, FL 32810 **Current Mailing Address: New Mailing Address:** PO BOX 547791 ORLANDO, FL 32854 FEI Number: 22-3940206 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIRECT BUSINESS CONSULTING 1515 RIDGEWOOD AVE SUITEA HOLLY HILL, FL 32117 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MUTO, DILLON Name: Name: Address: PO BOX 941552 Address: City-St-Zip: MAITLAND, FL 32794 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition Name: KOLB, JOHN D Name: Address: PO BOX 547791 Address: City-St-Zip: ORLANDO, FL 32854 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition OLEYAR, WILLIAM 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 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.

Address:

City-St-Zip:

SIGNATURE: DILLON MUTO MGR 04/30/2008