May 05, 1999 8:00 am Secretary of State

05-05-1999 90190 035 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L33657

RAINBOW WASTE SERVICE, INC.

Principal Place	e of Business	Mailing Address				s immitmer and title title ditte mitel 1807 bib	is aldis bigit gigit	A1811 B1811 1881
2900 N.W. 72 S	ST ·	2900 N.W. 72 ST						
MIAMI FL 33014 MIAMI FL 33014						DO NOT WRITE IN THIS CRACE		
บร						DO NOT WRITE IN THIS SPACE		
		•				3. Date Incorporated or Qualifed 11/30/1989		
Principal Place of Business 2a. Mailing Address						4. FEI Number	Ar	oplied For
21		26		_		65-0192637	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional equired
City & State		City & State				6. Election Campaign Financing	- \$5.00	-May-Be
23		28	·			Trust Fund Contribution	-	to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year	Intangible	
24	25	29	30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Cur					10. Name and Address of New Registere	ed Agent	
				81	Name			
	z, rafael				01 111	(D.C. David)		
7455	5 NW 144TH ST.			82	Street Addre	dress (P.O. Box Number is Not Acceptable)		
HIAL	EAH FL 33014		ŀ	83				
	•		ļ					
			i	84	City	F	85 Zip	Code
11 Purcuant	to the provisions of Sections 607	0502 and 607 1508. Florida Sta	tutes the at	nove-	named corpo	ration submits this statement for the purpose	of changing its	registered
) office or r	egistered agent, or both, in the St.	ate of Florida. Such change wa:	s authorized	by th	he corporation	's board of directors. I hereby accept the app	pointment as re	gistered
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505, I	Florida Statu	ites.			•	
SIGNATURE				. =:		when reinstating) DATE		
42	Signature, typed or printed name of registered	AND DIRECTORS	13.	Agent s	signature required	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
12.		AND DIRECTORS	13.			ADDITIONS/OFFICERS	1110 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TITLE		□ DELETE	1 1 717	ı E			☐ Change	Addition
l [DIAZ BAGAGI	☐ DELETE	1.1 111		Ì		☐ Change	☐ Addition
NAME	DIAZ, RAFAEL	DELETE	1.2 NA	ME			Change	☐ Addition
STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR	☐ OELETE	1.2 NA 1.3 STI	ME REETA	ADDRESS		☐ Change	☐ Addition
STREET ADDRESS	DIAZ, RAFAEL		1.2 NA 1.3 STI 1.4 CR	ME REETA Y-ST-				
STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR	☐ DELETE	1.2 NA 1.3 STI 1.4 CR 2.1 TR	ME REETA Y-ST-			☐ Change	☐ Addition
STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR		1.2 NA 1.3 STI 1.4 CR 2.1 TIT 2.2 NA	ME REETA Y-ST-I LE ME	ZIP			
STREET ADDRESS CITY-ST-ZIP TITLE	DIAZ, RAFAEL 7455 NW 144 STR		1.2 NA 1.3 STI 1.4 CR 2.1 TIT 2.2 NA	ME REETA Y-ST-I LE ME				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIAZ, RAFAEL 7455 NW 144 STR	☐ DELETE	1.2 NA 1.3 STI 1.4 CR 2.1 TXI 2.2 NA 2.3 ST 2.4 CI	ME Y-ST-LE ME REET A TY-ST-	ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR		1.2 NA 1.3 STI 1.4 CRI 2.1 TRI 2.2 NA 2.3 ST 2.4 CRI 3.1 TRI	ME REET A Y-ST- LE ME REET A TY-ST-	ZIP ADDRESS			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIAZ, RAFAEL 7455 NW 144 STR	☐ DELETE	1.2 NA 1.3 STI 1.4 CR 2.1 TXI 2.2 NA 2.3 ST 2.4 CI	ME REET A Y-ST- LE ME REET A TY-ST-	ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETE	1.2 NA 1.3 STI 1.4 CR 2.1 TR 2.2 NA 2.3 ST 2.4 CR 3.1 TR 3.2 NA	ME Y-ST-LE ME REET A TY-ST-LE	ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETE	1.2 NA 1.3 STI 1.4 CR 2.1 TR 2.2 NA 2.3 ST 2.4 CR 3.1 TR 3.2 NA 3.3 ST 3.4, CR	ME REET A Y-ST- LE ME REET A TY-ST- LE ME REET A	ZIP ADDRESS - ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETE	1.2 NA 1.3 STI 1.4 CFI 2.1 TIT 2.2 NA 2.3 ST 2.4 CFI 3.1 TIT 3.2 NA 3.3 ST	ME REET A Y-ST- LE ME REET A TY-ST- LE ME REET A	ZIP ADDRESS -ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETE	1.2 NA 1.3 STI 1.4 CR 2.1 TR 2.2 NA 2.3 ST 2.4 CR 3.1 TR 3.2 NA 3.3 ST 3.4, CR	ME REET A TY-ST- LE ME REET A TY-ST- LE ME REET A TY-ST-	ZIP ADDRESS -ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETE	1.2 NA 1.3 STI 1.4 CFI 2.1 TIT 2.2 NA 2.3 ST 2.4 CFI 3.1 TIT 3.2 NA 3.3 ST 3.4. CFI 4.1 TRI 4.2 NA	ME REET A Y-ST- LE ME REET A TY-ST- LE TY-ST- LE LE ME	ZIP ADDRESS -ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETÉ	1.2 NA 1.3 STI 1.4 CFI 2.1 TIT 2.2 NA 2.3 ST 2.4 CFI 3.1 TIT 3.2 NA 3.3 ST 3.4. CFI 4.1 TRI 4.2 NA	ME Y-ST- LE ME REET A TY-ST- LE ME REET A TY-ST- LE MME REET A	ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS		Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETE	1.2 NA 1.3 STI 1.4 CFI 2.1 TTI 2.2 NA 2.3 ST 2.4 CFI 3.1 TTI 3.2 NA 3.3 ST 3.4. CFI 4.1 TFI 4.2 N/ 4.3 ST	ME Y-ST-LE ME REET A TY-ST-LE ME REET A TY-ST-LE ME REET A TY-ST-LE MME REET A	ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETÉ	1.2 NA 1.3 STI 1.4 CFI 2.1 TTI 2.2 NA 2.3 ST 2.4 CFI 3.1 TTI 3.2 NA 3.3 ST 3.4. CFI 4.1 TFI 4.2 NA 4.3 ST 4.4 CFI	ME Y-ST-LE ME REET A TY-ST- LE ME REET A TY-ST- LE ME REET A TY-ST- LE ME REET A	ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS		Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETÉ	1.2 NA 1.3 STI 1.4 CFI 2.1 TIT 2.2 NA 2.3 ST 2.4 CFI 3.1 TIT 3.2 NA 3.3 ST 3.4. CFI 4.1 TFI 4.2 N/ 4.3 ST 4.4 CFI 5.1 TIT 5.2 NA	ME Y-ST- LE ME TY-ST- LE ME TY-ST- LE ME TY-ST- LE ME REET A TY-ST- LE ME REET A ME REET A ME REET A ME ME	ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS		Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETÉ	1.2 NA 1.3 STI 1.4 CFI 2.1 TIT 2.2 NA 2.3 ST 2.4 CFI 3.1 TIT 3.2 NA 3.3 ST 3.4. CFI 4.1 TFI 4.2 N/ 4.3 ST 4.4 CFI 5.1 TIT 5.2 NA	ME Y-ST-LE ME REET A TY-ST-LE ME REET A TY-ST-LE ME REET A TY-ST-LE ME REET A REET A	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS		Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	☐ DELETÉ	1.2 NA 1.3 STI 1.4 CFI 2.1 TTI 2.2 NA 2.3 ST 2.4 CFI 3.1 TTI 3.2 NA 3.3 ST 3.4 CFI 4.1 TTI 4.2 N/ 4.3 ST 4.4 CFI 5.1 TTI 5.2 NA 5.3 ST	ME Y-ST-LE ME TY-ST-LE ME REET A TY-ST-LE ME REET A TY-ST-LE ME REET A REET A TY-ST-LE ME REET A TY-ST-LE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS		Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIAZ, RAFAEL 7455 NW 144 STR HIALEAH FL	DELETE	1.2 NA 1.3 STI 1.4 CFI 2.1 TIT 2.2 NA 2.3 ST 2.4 CFI 3.1 TIT 3.2 NA 3.3 ST 3.4 CFI 4.1 TIT 4.2 N/ 4.3 ST 4.4 CFI 5.1 TIT 5.2 NA 5.3 ST 5.4 CFI 5.4 CFI 5.4 CFI 5.4 CFI 5.4 CFI 5.5 CFI 5.4 CFI 5.5 CFI	ME REET A Y-ST- LE ME REET A TY-ST- LE ME REET A Y-ST- LE ME REET A REET A REET A LE ME REET A LE LE LE LE LE LE LE LE LE L	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS		Change	Addition Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)