2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L38771

FILED Feb 28, 2006 Secretary of State

Entity Name: MEDICO ENVIRONMENTAL SERVICES, CORP.

Current Principal Place of Business:		New Principal Place of Business:		
13200 58T CLEARW	H ST. N. ATER, FL 37760) US		
Current M	ailing Address	:	New Mailing Addres	s:
13200 58T CLEARW	H ST. N. ATER, FL 37760) US		
El Number	: 59-3004111	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cu	rrent Registered Agent:	Name and Address of	of New Registered Agent:
	GERALD B			
	L 33770 US			
₋ARGO, F Γhe above		ıbmits this statement for the μ	ourpose of changing its registere	ed office or registered agent, or both,
_ARGO, F The above	named entity su e of Florida.	ıbmits this statement for the ເ	ourpose of changing its registere	ed office or registered agent, or both,
ARGO, F The above n the State	named entity su e of Florida. RE:	sbmits this statement for the positions of Registered Age		ed office or registered agent, or both, Date
ARGO, F The above n the State BIGNATUI	named entity su e of Florida. RE: Electronic			
ARGO, F The above n the State BIGNATUI	named entity su e of Florida. RE: Electronic	Signature of Registered Ago	ent	
ARGO, F The above In the State SIGNATUI Election Car DFFICER: Italiane: Address:	named entity sue of Florida. RE: Electronic mpaign Financing	Signature of Registered Age Trust Fund Contribution (). ORS: Delete LD B DCKS RD	ent	Date
ARGO, F The above n the State BIGNATUI	named entity sue of Florida. RE: Electronic mpaign Financing S AND DIRECTO PTD () D HUBBELL, GERA 499 N INDIAN RO BELLEAIR BLUFF	C Signature of Registered Age Trust Fund Contribution (). ORS: Delete LD B DCKS RD FS, FL 33770 Delete LA M DCKS RD	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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: STELLA M HUBBELL TD 02/28/2006