FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

L61538 DOCUMENT # CITY ENVIRONMENTAL SERVICES LANDFILL, INC. OF FL **ORIDA** Principal Place of Business Mailing Address 9280 BAY PLAZA BLVD. 3400 EAST LAFAYETTE **SUITE 707** DETROIT MI 48207 **TAMPA FL 33619** 3. Date Incorporated or Qualified 04/02/1990 04/25/1995 2. Principal Place of Business 2a. Mailing Address 4 EEL Number Applied For 58-1931257 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 27 Fee Required City & State Oity & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes X No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** 83 R4 Oity 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature requ CR2E034 (12/95) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 TilLE ☐ Change Addition LEVIN, YALE NAME 1.2 NAME 3400 EAST LAFAYETTE STREET STREET ADDRESS 13 STREET ADDRESS **DETROIT MI 48207** CHTY - ST - ZIP 14 CHY-ST ZID DEVP TITLE DEL ETE ☐ Addition 2.1 TILE Change SAPUTO, PETER C NAME 3400 E. LAFAYETTE STREET ADDRESS 2.3 STREET ADDRESS **DETROIT MI** City - St - ZiP 24 CITY - \$1 - ZIP DELFTE THILE 3 1 THILE ☐ Addition Change PIESKO, MICHAEL L NAME 3.2 NAME 3400 E. LAFAYETTE STREET ADDRESS 3.3 STREET ADDRESS DETROIT MI 48207 CITY-ST-ZIP 3.4 CHY-ST-ZIP THILE DELETE 4 1 1116 ☐ Change Addition MCCANN, KATHLEEN B NAME 4.2 NAME 3400 E. LAFAYETTE STREET ADDRESS 4 3 STREET ADDRESS DETROIT MI CITY-ST-ZIP 4.4 CILY - ST. ZIP DELETE THLE 5 A TITLE □ Change Addition MANCZAK, RICHARD P 5.2 NAME 3400 E. LAFAYETTE STREET ADDRESS 5.3 STREET ADDRESS **DETROIT MI 48207** CITY-ST-ZIP 5.4 CiTY - ST - ZiP DELETE TITLE 6 1 TITLE Change Add-tion MCCARTHY, TIMOTHY J NAME 6.2 NAME 3400 E. LAFAYETTE STREET ADDRESS 6.3 STREET ADDRESS **DETROIT MI 48207** CITY - ST - ZIP 6.4 CITY-ST-ZIF

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylone Ptione #

Do