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

FILED
99 MAY -3 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M64832

1. Corporation Name

Disposall, Inc. of Polk

Principal Place of Business	Mailing Address
2101 Highway 60 West Lake Wales, FL 33853	PO Box 4445 Winter Park, FL 32793

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 1/14/1988

4. FEI Number: 59-2872070 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [ ] No

2. Principal Place of Business	2a. Mailing Address
21 110 S.E. 6th Street	26 110 S.E. 6th Street
Suite, Apt. #, etc. 22 28th fl	Suite, Apt. #, etc. 27 28th fl
City & State 23 Ft. Lauderdale, FL	City & State 28 Ft. Lauderdale, FL
Zip / Country 24 33301 25	Zip / Country 29 33301 30

9. Name and Address of Current Registered Agent

Eugene Calabrese
3970 Irma Shores Drive
Orlando, FL

10. Name and Address of New Registered Agent

81 Name: C T Corporation System
82 Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road
83
84 City: Plantation FL 85 Zip Code: 33324

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Vicky Goldstein — VICKY GOLDSTEIN, SPECIAL ASSISTANT SECRETARY — 4/30/99
Signature, typed or printed name of registered agent and date if applicable (NOTE: No printed Agent's signature required when filing online)

12. OFFICERS AND DIRECTORS

TITLE	DP	X DELETE
NAME	Eugene Calabrese	
STREET ADDRESS	3970 Irma Shores Dr.	
CITY-ST-ZIP	Orlando, FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D	X Change [ ] Add
12 NAME	Harris W. Hudson	
13 STREET ADDRESS	110 S.E. 6th St. 28th Floor	
14 CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
21 TITLE	P	[ ] Change [ ] Add/Delete
22 NAME	James Cosman	
23 STREET ADDRESS	110 S.E. 6th St. 28th Floor	
24 CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
31 TITLE	V.P. & Secretary	[ ] Change [ ] Add/Delete
32 NAME	David A. Barclay	
33 STREET ADDRESS	110 S.E. 6th St. 28th Floor	
34 CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
41 TITLE		[ ] Change [ ] Add/Delete
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Add/Delete
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Add/Delete
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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14. I hereby certify that the information indicated on 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 complies with the applicable requirements of Section 607.1622, Florida Statutes; and 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 added by amendment with an address with all other like empowered.

SIGNATURE: 4-29-99 (954)769-2928

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR