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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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May 14 1997 8:00am

Secretary of State

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DIVISION OF CORPORATIONS

1997

SIGNATURE:

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(4)

FLORIDA SANITATION, INC. OF PALM BEACH COUNTY Principal Place of Business 1831 2ND AVENUE NORTH (33460) P.O. BOX 1683 LAKE WORTH FL 33460-1683 LAKE WORTH FL 33460-1683					PRTH (33480)	,					
								Date Incorporated or Qualifity 09/14/1988		ate of Last F /25/1996	leport
2. Principal	Place of Bus	iness	26.	Mailing Address		•		4. FEI Number	1 01	·	oplied For
1	**************************************		26					65-0074614			ot Applicable
Suite, Api 2	t. #, eic		27	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Sta	ite			City & State				6. Election Campaign Financin	0	· · · · · · · · · · · · · · · · · · ·	May Be
3			28					Trust Fund Contribution			to Fees
- Zip 71		Country		Zip	—	untry		8. This corporation has liability			. 199.032,
4	9. Name	25 e and Address of Curr	29 rent Registe	ered Agent	[30]	T		Florida Statutes 10. Name and Address of Nev	Yes		
CI	VELLI, VICT					81 1	Name				***************************************
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	NIA FL 330				•	82 5	Street Addr	ress (P.O. Box Number is Not Acce	ptablej		
						83					
						84 (City			85 Zip	Code
		7 *************************************							FL	-	
11. Pursuan office or	t to the provi- registered a	isions of Sections 607.0 Igent, or both, in the Sta	0502 and 60 ate of Florida	07.1508, Florida Sta la. Such change w	atutes, the a	above-n	nameo corp he corporat	poration submits this statement for t tion's board of directors. I hereby a	he purpose o ccept the an	ot changing it pointment as	reaistered
SIGNATURE		d or printed name of registered	agent and little if	f applicable.	NOTE: Registere			coration submits this statement for to cion's board of directors. I hereby a red when reinstating)	DATE		
SIGNATURE	Stoprations Type		agent and little if	f applicable. (NOTE: Registere	ed Agent s			DATE	D DIRECTOR	IS IN 12
SIGNATURE 12. IIILE	Sugrature tyres	ed or printed name of registered OFFICERS /	agent and little if	f applicable.	NOTE: Registere 13.	ed Agent s		red when reinstating)	DATE		
SIGNATURE 1 2. Dile Name	Sugrature tyres	OFFICERS A	agent and little if	f applicable. (NOTE: Registers 13. 1.1 T	ed Agent s	signature requir	red when reinstating)	DATE	D DIRECTOR	IS IN 12
SIGNATURE 12. Title Name Strell adoress	D CINELLI	OFFICERS A , VICTOR 8TH ST	agent and little if	f applicable. (NOTE: Registere 13. 1.1 T 1.2 N 1.3 S	ed Agent s TITLE NAME	signature requir	red when reinstating)	DATE	D DIRECTOR	IS IN 12
	D CINELLI 255 SE DANIA F	OFFICERS A WCTOR 6TH ST	agent and little if	f applicable. (NOTE: Registere 13. 1.1 T 1.2 N 1.3 S	ed Agents TITLE NAME STREET AD	signature requir	red when reinstating)	DATE	D DIRECTOR	IS IN 12
SIGNATURE 12. THE NAME STRELL ADORESS DILY-S1-ZIP HITE NAME	D CINELLI 255 SE DANIA F D CINELLI	OFFICERS / OFFICERS / , VICTOR 6TH ST	agent and little if	r applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.8 14.0 2.17 22.N	ed Agents ITLE NAME STREET AD CITY-ST-Z ITLE NAME	signature requir DORESS ZIP	red when reinstating)	DATE	D DIRECTOR Change	is IN 12
SIGNATURE 12. THE NAME STRELL ADDRESS THE NAME STRELL ADDRESS	D CINELLI 255 SE DANIA F D CINELLI 520 NW	OFFICERS / OFFICERS / , VICTOR 6TH ST FL , JOHN 183 WAY	agent and little if	r applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.8 14.0 2.17 22.N 23.8	ed Agents ITLE NAME STREET AD ITLE NAME STREET AD	Signature requir	red when reinstating)	DATE	D DIRECTOR Change	is IN 12
SIGNATURE 12. 111LE NAME STRELL ADDRESS NAME STRELL ADDRESS STRELL ADDRESS STRELL ADDRESS	D CINELLI 255 SE DANIA F D CINELLI 520 NW	OFFICERS / OFFICERS / , VICTOR 6TH ST	agent and little if	T applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.8 14.0 2.17 22.N 23.8	ed Agents ITLE NAME STREET AD CITY-ST-2 ITLE NAME STREET AD CITY-ST-3	Signature requir	red when reinstating)	DATE	D DIRECTOR Change Change	S IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREEL ADDRESS HITLE NAME STREEL ADDRESS CILY ST. ZIP TITLE	D CINELLI 255 SE DANIA F D CINELLI 520 NW	OFFICERS / OFFICERS / , VICTOR 6TH ST FL , JOHN 183 WAY	agent and little if	r applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.8 1.4.C 2.17 22.N 23.S 2.4.1 3.17	ed Agents ITLE NAME STREET AD CITY-ST-2 ITLE NAME STREET AD CITY-ST-3	Signature requir	red when reinstating)	DATE	D DIRECTOR Change	is IN 12
SIGNATURE 12. TITLE NAME STRELL ADDRESS TITLE NAME STRELL ADDRESS CITY - ST. ZIP TITLE	D CINELLI 255 SE DANIA F D CINELLI 520 NW PEMBRO	OFFICERS / OFFICERS / , VICTOR 6TH ST FL , JOHN 183 WAY	agent and little if	T applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.S 1.4.C 2.17 22.N 23.S 2.41 31.T 32.N	ed Agent s ITLE NAME STREET AD CITY-ST-2 ITLE NAME STREET AD CITY-ST-A	Signature requir	red when reinstating)	DATE	D DIRECTOR Change Change	S IN 12 Addition Addition
SIGNATURE 12. THE NAME STREEL ADDRESS THE NAME STREEL ADDRESS CHY-ST, ZIP THE TAME	D CINELLI 255 SE DANIA F D CINELLI 520 NW PEMBRO	OFFICERS / OFFICERS / , VICTOR 6TH ST FL , JOHN 183 WAY	agent and little if	T applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.S 1.40 2.17 22.N 23.S 2.41 3.17 32.N 3.3.S	ed Agent s TITLE NAME STREET AD CITY-ST-7 TITLE NAME STREET AD CITY-ST-1 TITLE	DORESS ZIP DORESS ZIP DORESS	red when reinstating)	DATE	D DIRECTOR Change Change	S IN 12 Addition Addition
SIGNATURE 12. Tille NAME STRELLADORESS DILY-SU-ZIP	D CINELLI 255 SE DANIA F D CINELLI 520 NW PEMBRO	OFFICERS / OFFICERS / , VICTOR 6TH ST FL , JOHN 183 WAY	agent and little if	T applicable (TORS DELETE	NOTE: Registers 13. 1.17 12.N 13.S 1.40 2.17 22.N 23.S 2.41 3.17 32.N 3.3.S	ed Agent s ITTLE NAME STREET AD CITY-ST-2 ITTLE NAME STREET AD CITY-ST- ITTLE NAME STREET AD CITY-ST- CITY-ST- CITY-ST-	DORESS ZIP DORESS ZIP DORESS	red when reinstating)	DATE	D DIRECTOR Change Change	S IN 12 Addition Addition
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