

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90341 004 ***150.00

DOCUMENT # **P000000 42327**

1. Entity Name
SOPRANOS WASTE MANAGEMENT Inc.

Principal Place of Business Mailing Address
9700 Merle Rd. N.
Fort Myers FL 33903

C0068547

2. Principal Place of Business 3. Mailing Address
1325C Del Prado Blvd

Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
CAPE CORAL FL

4. FEI Number
65-1001160

Applied For
 Not Applicable

Zip Country Zip Country
33990 Lee

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:

7. Name and Address of New Registered Agent

DAVID W. CARY
1325C Del Prado Blvd S
CAPE CORAL FL 33990

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete D ANNAZONE, ANTHONY 9700 MERLE DRIVE FORT MYERS FL 33917
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition D/P/S/T ANNAZONE, ANTHONY 9700 MERLE ROAD NORTH FORT MYERS FL 33903
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition D DAVID W CARY 1325C Del Prado Blvd. CAPE CORAL FL 33990
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
 SIGNATURE AND OFFICER PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01
 Date

Daytime Phone #