

2003 AMENDED

APPROVAL
AND
FILED

03 SEP 22 PM 5:38

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000053802		
1. Entity Name WASTE SOLUTIONS, INC.		
Principal Place of Business 307 PALMETTO AVENUE MELBOURNE, FL 32901		Mailing Address 307 PALMETTO AVENUE MELBOURNE, FL 32901
2. Principal Place of Business 5241 NE 3rd TER.		3. Mailing Address 5241 NE 3rd TER.
City & State FT. LAUDERDALE, FL		City & State FT. LAUDERDALE, FL
Zip 33334		Zip 33334
Country USA		Country USA
4. FEI Number 04-3666837		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CUMMINGS, ROBERT C 6241 NE 3RD TERR FT LAUDERDALE, FL 33334-2403		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ DATE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Please attach Agent Signature when filing this statement)		
FILE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$500.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
12. I hereby certify that the information supplied with 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Robert C. Cummings</u> 9/15/03 (954) 771-1615		