

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2003 8:00 am
Secretary of State

07-10-2003 90115 039 ***150.00

DOCUMENT # P02000129438

1. Entity Name
WASTE REMEDY, INC.



Principal Place of Business
683 LAKE GEORGE
MELBOURNE FL 32940

Mailing Address
683 LAKE GEORGE
MELBOURNE FL 32940

2. Principal Place of Business

682 Lake George Dr
Suite, Apt. #, etc.

3. Mailing Address

682 Lake George Dr
Suite, Apt. #, etc.

City & State

Melbourne FL

City & State

Melbourne FL

Zip

32940

Country

Zip

32940

Country

4. FEI Number

01-0750503

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

CHEESEMAN, KEN
683 LAKE GEORGE
MELBOURNE FL 32940

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

682 Lake George Dr

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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

TITLE PS ☐ Delete
NAME CHEESEMAN, KEN
STREET ADDRESS 683 LAKE GEORGE
CITY-ST-ZIP MELBOURNE FL 32940

TITLE VTD ☐ Delete
NAME BELL, ASHLEY
STREET ADDRESS 2730 COZUMEL DR., APT. 1404
CITY-ST-ZIP MELBOURNE FL 32940

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 _____

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS ☒ Change ☐ Addition
NAME CHEESEMAN, KEN
STREET ADDRESS 682 Lake George Dr
CITY-ST-ZIP Melbourne FL 32940

TITLE VTD ☒ Change ☐ Addition
NAME BELL, ASHLEY
STREET ADDRESS 1378 Auburn Lakes Dr
CITY-ST-ZIP Viera FL 32955

TITLE ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

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: Ken Cheeseman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/03 **(321)242-5885**
Date Daytime Phone #

0018942 AV

CR2E034 (4/03)