

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000063294

Entity Name: RELIABLE WASTE SERVICES, INC.

FILED
Oct 27, 2009
Secretary of State

Current Principal Place of Business:

6950 NW 53 TR.
MIAMI, FL 33166

New Principal Place of Business:

7000 NW 53 TR.
MIAMI, FL 33166

Current Mailing Address:

6950 NW 53 TR.
MIAMI, FL 33166

New Mailing Address:

7000 NW 53 TR.
MIAMI, FL 33166

FEI Number: 16-1671010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARA, LUIS F
6950 NW 53 TR.
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

LARA, LUIS F
7000 NW 53 TR.
MIAMI, FL 33166 US

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: LUIS LARA

10/27/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALTUVE, NORYS
Address: 6950 NW 53 TR.
City-St-Zip: MIAMI, FL 33166

Title: TSD () Delete
Name: LARA, LUIS F
Address: 6950 NW 53 TR.
City-St-Zip: MIAMI, FL 33166

Title: VPD () Delete
Name: ALTUVE, LISSET
Address: 6950 NW 53 TR.
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALTUVE, NORYS
Address: 7000 NW 53 TR.
City-St-Zip: MIAMI, FL 33166

Title: TSD (X) Change () Addition
Name: LARA, LUIS F
Address: 7000 NW 53 TR.
City-St-Zip: MIAMI, FL 33166

Title: VPD (X) Change () Addition
Name: ALTUVE, LISSET
Address: 7000 NW 53 TR.
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORYS ALTUVE

PD

10/27/2009

Electronic Signature of Signing Officer or Director

Date