

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000000160

FILED
Feb 16, 2009
Secretary of State

Entity Name: NATIONAL WASTE SYSTEMS, INCORPORATED

Current Principal Place of Business:

5638 WHISPERING WILLOW WAY
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

PO BOX 613
ESTERO, FL 33928

New Mailing Address:

PO BOX 613
ESTERO, FL 33929

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, LAUREN A
5638 WHISPERING WILLOW WAY
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANTIAGO, LAUREN A
Address: PO BOX 613
City-St-Zip: ESTERO, FL 33928

Title: CEO () Delete
Name: SANTIAGO, JASON D
Address: PO BOX 613
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANTIAGO, LAUREN A
Address: PO BOX 613
City-St-Zip: ESTERO, FL 33929

Title: CEO (X) Change () Addition
Name: SANTIAGO, JASON D
Address: PO BOX 613
City-St-Zip: ESTERO, FL 33929

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: LAUREN SANTIAGO

P

02/16/2009

Electronic Signature of Signing Officer or Director

Date