

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Oct 24, 2007  
Secretary of State**

DOCUMENT# P05000098139

Entity Name: BUSY BEE TRASH BOX, INC.

**Current Principal Place of Business:**

3054 N DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

1660 ROOSEVELT BLVD  
DAYTONA BEACH, FL 32124

**Current Mailing Address:**

3054 N DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

1660 ROOSEVELT BLVD  
DAYTONA BEACH, FL 32124

FEI Number: 51-0549646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TUCHOLSKI, RONALD  
3054 N DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168 US

**Name and Address of New Registered Agent:**

LAPIERE, MARK  
1660 ROOSEVELT BLVD  
DAYTONA BEACH, FL 32124 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: MARK LAPIERE

10/24/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LAPIERE, MARK  
Address: 3054 N DIXIE FREEWAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete  
Name: TUCHOLSKI, RONALD  
Address: 3054 N DIXIE FREEWAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LAPIERE, MARK  
Address: 1660 ROOSEVELT BLVD  
City-St-Zip: DAYTONA BEACH, FL 32124

Title: S (X) Change ( ) Addition  
Name: LAPIERE, STACEY  
Address: 1660 ROOSEVELT BLVD  
City-St-Zip: DAYTONA BEACH, FL 32124

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: MARK LAPIERE

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10/24/2007

Electronic Signature of Signing Officer or Director

Date