

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000056215

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** BIO-MED WASTE SOLUTIONS, INC.

**Current Principal Place of Business:**

8201 NW 64TH ST. #8  
MIAMI, FL 33178

**New Principal Place of Business:**

8201 NW 64TH ST. #8  
MIAMI, FL 33166

**Current Mailing Address:**

8201 NW 64TH ST. #8  
MIAMI, FL 33178

**New Mailing Address:**

8201 NW 64TH ST. #8  
MIAMI, FL 33166

**FEI Number:** 27-0635814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REINSTEIN, MICHAEL  
10940 BIRCHWOOD PLACE  
PEMBROKE PINES, FL 33026 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:** PVPS  
**Name:** REINSTEIN, MICHAEL  
**Address:** 10940 BIRCHWOOD PLACE  
**City-St-Zip:** PEMBROKE PINE, FL 33026

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL REINSTEIN

PRES

01/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date