

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P26356

1. Entity Name

TRANSAMERICAN WASTE INDUSTRIES, INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90088 022 ***150.00

Principal Place of Business

1001 FANNIN SUITE 4000
HOUSTON TX 77002
US

Mailing Address

1001 FANNIN SUITE 4000
HOUSTON TX 77002
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **76-0525560**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SIMPSON, ROBERT	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BLANKFIELD, BYRAN J	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	T	<input type="checkbox"/> Delete
NAME	JONES, RONALD	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V/AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Linda J. Smith	
STREET ADDRESS	1001 Fannin, Suite 4000	
CITY-ST-ZIP	Houston, Tx 77002	
TITLE	V/CFO/C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruce E. Snyder	
STREET ADDRESS	1001 Fannin, Suite 4000	
CITY-ST-ZIP	Houston, Tx 77002	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David P. Steiner	
STREET ADDRESS	1001 Fannin, Suite 4000	
CITY-ST-ZIP	Houston, Tx 77002	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda J. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda J. Smith 449-01 713-512-6200

Date

Daytime Phone #

CR2E034 (10/00)