## 2ปี02 UNIFORM BUSINESS REPORT (UBR)

P30720

1. Entity Name

**DOCUMENT#** 

ALLWASTE TANK OF EARING INC

ALLVASTE TAIN CLEANING,	INC.	f
Principal Place of Business	Mailing Address	
- 5151 SAN FELIPE SUITE 1600 HOUSTON TX 77056 US	5151 SAN FELIPE SUITE 1600 HOUSTON TX 77056 US	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

## **FILED** Jul 23, 2002 8:00 am Secretary of State 07-23-2002 90346 045 \*\*\*550.00

Principal Place of Business  - 5151 SAN FELIPE SUITE 1600 HOUSTON TX 77056 US			Mailing Address 5151 SAN FELIPE SUITE 1600 HOUSTON TX 77056 US										
2. Principal Place of Business 3. Mailing			3. Mailing Address	ng Address				1 18611891 188 18111 8	<b>i</b> lei 1 <b>4918</b> 14 <b>8</b> (1	i Atii Aitii Biti	1 BIEN BIBN	#1#11 <b>#1</b> #11 1 <b>#</b> #1	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State			City & State			<b>4.</b> FE	I Number 58-1	615191		<u> </u>	pplied For ot Applicable	<u></u>	
Zip		Country	Zip Country		try		5. Certificate of Status Desired				¢9.75 Additional		
	6. Name	and Address of Current F	legistered Agent		· <del>····</del>	<u></u>	7. Na	me and Address	of New Re				₫-
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301					Name Street Address (P.O. Box Number is Not Acceptable)								-
IALLATA.	33EE FL 38				City					FL	Zip Cod	ie	+
the obligat	named entititions of regist		the purpose of changing its	registere	ed office o	r registered	d agen	it, or both, in the S	itate of Flori	ida. I am fai	miliar with	, and accept	
SIGNATURE.	Signature, typed	or printed name of registered agent ar	d title if applicable. (NOTE	: Registered	Agent signat	ure required wh	nen reins	tating)		DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!! After September 13, Make Check Payab	2002 f	ee will b	e \$750.00	,	10. Election Cam Trust Fund C		~ —		00 May Be d to Fees	
11.		OFFICERS AND D	PIRECTORS	12.			ADDI	TIONS/CHANGE	S TO OFFIC	CERS AND E	PIRECTOR	IS IN 11	١.
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ALEC FELIPE, STE 1600 I TX 77056	<b>□X</b> Delete			5151 5	SAU	ECAΠΟ FELLPE,# DITK 7705		[	_] Change	<b>X</b> Addition	00,4,40010
TITLE NAME STREET ADDRESS CITY-ST-ZIP		N, TOM FELIPE, SUITE 1600 I TX 77056	<b>⊠</b> Delete			VP PHIL 7 SHSI	THU Sar	LETON SELLPE, TO	<b>+</b> 1600		Change	Addition	78
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS VENTRESI 100 KING HAMILTON		<b>⊠</b> Delete			S Descr	AH	llusetta)	· - ·	_	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							[	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							E.	_ Change	☐ Addition	
TITLE NAME			☐ Delete	TITLE						C	Change	Addition	

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 anactiment with an address, with all other like empowered. changed, or on an attac

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP