## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**FILED** Apr 23 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT # P32528** EARTHWATCH WASTE SYSTEMS, INC. Principal Place of Business Mailing Address 3527 HARLEM ROAD 3527 HARLEM ROAD **BUFFALO NY 14225 BUFFALO NY 14225** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/18/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0218190 Not Applicable Suite, Apt #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 83 City 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE ☐ Change WAGNER, LOUIS E. 1.2 NAME 3527 HARLEM ROAD STREET ADDRESS 1.3 STREET ADDRESS **BUFFALO NY 14225** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 THEF 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change \_\_\_ Addition 4. 2 NAME NAM! STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4 4 CITY - ST- ZIP DELETE Change Addition 5 1 TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5 4 CITY-ST-ZIP DELETE Change Addition

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chantied on an attachment with an oatless.

SIGNATURE:

4/16/98 716-833-3286 SIGNATURE: 4/16/98 716-833-3286

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS