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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P93000033663 (4)

| Principal Place of Business Mailing Address 1927 STRATFORD WAY WEST PALM BEACH FL 33409 MONIT'S WASTE DISPOSAL, INC. Mailing Address 1927 STRATFORD WAY WEST PALM BEACH FL 33409 | | | | | |
|--|--|---|--|---|---|
| | | | | 3. Date incorporated or Qualified 05/10/1993 | 3a. Date of Last Report 05/11/1995 |
| .2. Principal Pla | ace of Business | 2a. Mailing Address | | 4. FEI Numbe | Applied For |
| Suite, Apt. # | , etc. | | | 65-0410763 | Not Applica |
| 2 | | 27 | | 5. Certificate of Status Desired | \$8.75 Additiona |
| City & State | | City & State | | 6. Election Campaign Financing | = \$5.00 May Be |
| <i>7</i> ip | Country | 28 | Country | Trust Fund Contribution | Added to Fees |
| 14 | 25 | 29 | 30 | This corporation has liability for Florida Statutes | |
| | 9. Name and Address of Cu | urrent Registered Agent | | 10. Name and Address of New F | |
| | | | 81 Name | | |
| AKIVA, A | | | 82 Street Add | dress (P.O. Box Number is Not Acceptat | bie) |
| | ratford way ALM Beach Fl. 33409 | | | | |
| neoi ra | NEW DEMON PL 33409 | | 83 | | |
| | | | 84 City | | 85 Zip Code |
| 11 Purcupat to | the provisions of Sections 607.0 | 0502 and 607.1508, Florida Stat | tutes, the above-named come | pration submits this statement for the pur | FL |
| FILE FOR SUBJECT | | Charles Co. at an | organism the compration's box | pration submits this statement for the pur and of directors. Thereby accept the appi | rpose of changing its registered of iointment as registered agent. I an |
| or registere familiar with | id agent, or both, in the State of :), and accept the obligations of : | Florida, Such change was autho Section 607 0505, Florida Statu | too | | |
| familiar with | id agent, or both, in the State of it, and accept the obligations of, t | Florida: Such Change was autho Section 607.0505, Florida Statul | tes | | |
| familiar with SIGNATURE | id agent, or both, in the State of t, and accept the obligations of, signature, typed or printed name of registered | Section 607.0505, Florida Statul | 103 | | GATE |
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PRINTED NAME OF SIGNING OF FICER OR DIRECTOR SIGNATURE:

5. 4-94 Darie Phase I