

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000050842

FILED
Mar 02, 2005
Secretary of State

Entity Name: HEALTHCARE WASTE REMOVAL & SERVICES, INC.

Current Principal Place of Business:

2423 NW 16TH LANE
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

516 NW 77TH ST.
BOCA RATON, FL 33487 US

Current Mailing Address:

2423 NW 16TH LANE
POMPANO BEACH, FL 33064 US

New Mailing Address:

516 NW 77TH ST.
BOCA RATON, FL 33487 US

FEI Number: 65-0424804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINEINGER, JEFFREY A.
2160 RABBIT HOLLOWE CIRCLE
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

WINEINGER, JEFFREY A.
2160 RABBIT HOLLOWE CIRCLE
DELRAY BEACH, FL 33445 US

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: JEFFREY A. WINEINGER

03/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WINEINGER, JEFFREY A
Address: 2160 RABBIT HOLLOWE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: WINEINGER, CONSTANCE M
Address: 2160 RABBIT HOLLOWE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JEFFREY A. WINEINGER

D

03/02/2005

Electronic Signature of Signing Officer or Director

Date