

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000010254 (8)

1. Corporation Name

MONTY'S DISPOSAL SERVICE, INC.

Principal Place of Business

1927 STRATFORD WAY
WEST PALM BEACH FL 33409

Mailing Address

1927 STRATFORD WAY
WEST PALM BEACH FL 33409

FILED

1995 JUL 20 AM 10:13

TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
01/31/1994

4. FEI Number 65-0468943 Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 11062 83rd Ct. S.

Suite, Apt. #, etc.

22 City & State
23 Boynton Bch, FL

24 Zip 33437 25 County P.D.

2a. Mailing Address
26 11062 83rd Ct. S.

Suite, Apt. #, etc.

27 City & State
28 Boynton Bch, FL

29 Zip 33437 30 County P.D.

9. Name and Address of Current Registered Agent

MONTESANO, VINCENT A JR
1927 STRATFORD WAY
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

61 Name Vincent A. Montesano Jr.
62 Street Address (P.O. Box Number is Not Acceptable)
11062 83rd Ct. S.
63
64 City Boynton Beach FL 65 Zip Code 33437

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

Vincent A. Montesano Jr.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP

13. ADDITIONAL CHANGES TO THE LISTED OFFICERS AND DIRECTORS

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY ST ZIP	☒ Change ☐ Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY ST ZIP	☐ Change ☐ Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY ST ZIP	☐ Change ☐ Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY ST ZIP	☐ Change ☐ Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY ST ZIP	☐ Change ☐ Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY ST ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(k), 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 or 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 changed, or on an attachment with an address.

SIGNATURE:

Vincent A. Montesano Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Signature) (Typed Name)

CR2E034 (3/95)