2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000074570

Entity Name: BIOMED WASTE CORPORATION

FILED Aug 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3773 NW 16TH STREET 16627 DEER PATH LANE LOXAHATCHEE, FL 33470 US

Current Mailing Address: New Mailing Address:

PO BOX 25475 16627 DEER PATH LANE LOXAHATCHEE, FL 33470 US

FEI Number: 65-0614079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEERING, CHERIE T
3773 NW 16TH STREET
LAUDERHILL, FL 33311 US

DEERING, CHERIE T
16627 DEER PATH LANE
LOXAHATCHEE, FL 33470 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: CHERIE DEERING 08/02/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: MS. (X) Change () Addition Name: DEERING, CHERIE T Name: DEERING, CHERIE T Address: 3773 NW 16TH STREET Address: 16627 DEER PATH LANE

 Address:
 3773 NW 16TH STREET
 Address:
 16627 DEER PATH LANE

 City-St-Zip:
 LAUDERHILL, FL 33311
 City-St-Zip:
 LOXAHATCHEE, FL 33470

Title: () Delete Title: MR. () Change (X) Addition
Name: DEERING, TRAVIS P
Address: Address: 16627 DEER PATH LANE
City-St-Zip: City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CHERIE DEERING MS. 08/02/2006