FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P95000080517 (2)

1. Corporation Name

DEBRIS REMOVAL SERVICES, INC.

Principal Place of Business
11105 ALDERLY COMMONS COURT
ORLANDO FL 32837

Mailing Address
11105 ALDERLY COMMONS COURT
ORLANDO FL 32837

2. Principal Place of Business
21 11105 ALDERLY CM. CT.
Suite, Apt #, etc
22
City & State
23 ORLANDO, FL
Zip 24 32837 Country 25 U.S.A.

2a. Mailing Address
26 11105 ALDERLY CM. CT.
Suite, Apt. #, etc.
27
City & State
28 ORLANDO, FL
Zip 29 32837 Country 30 USA

3. Date Incorporated or Qualified: 10/17/1995
3a. Date of Last Report: 10-17-95
4. FEI Number: 59-3339233 ☐ 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

9. **Name and Address of Current Registered Agent**

DEBONIS, MATTHEW J
11105 ALDERLY COMMONS COURT
ORLANDO FL 32837

10. **Name and Address of New Registered Agent**
81 Name: Sherril Cheevers
82 Street Address (P.O. Box Number is Not Acceptable): 13840 OSPREY LINKS RD.
83 APT. HOME 220
84 City: ORLANDO **FL** 85 Zip Code: 32837

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: Sherril Cheevers PRES. DATE: 4-29-96

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CHEEVERS, SHERRIL		1.2 NAME	
STREET ADDRESS	11105 ALDERLY COMMONS COURT		1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32837		1.4 CITY-ST-ZIP	
TITLE	VS	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	RAO, ROBERT		2.2 NAME	
STREET ADDRESS	11105 ALDERLY COMMONS COURT		2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32837		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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(3)(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: Sherril Cheevers PRES. 4-29-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)