

2000 UNIFORM BUSINESS REPORT (UBR)

2/6/00

DOCUMENT # **P970000021081**
 1. Entity Name
Eastern Environmental Services of Florida, Inc.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

00 MAY 11 PM 2:09

Principal Place of Business Mailing Address



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1001 Famin Suite 4000 Houston TX 77002 USA

3. Mailing Address
1001 Famin Suite 4000 Houston TX 77002 USA

4. FEI Number: **22-3508557** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent
 Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE President	<input type="checkbox"/> Delete
NAME Miller Mathews	
STREET ADDRESS 1001 Famin Suite 4000	
CITY-ST-ZIP Houston TX 77002	
TITLE Secretary & Sole Director	<input type="checkbox"/> Delete
NAME Bryan F. Blankfield	
STREET ADDRESS 1001 Famin Suite 4000	
CITY-ST-ZIP Houston TX 77002	
TITLE Treasurer	<input type="checkbox"/> Delete
NAME Ronald Jones	
STREET ADDRESS 1001 Famin Suite 4000	
CITY-ST-ZIP Houston TX 77002	
TITLE Vice President	<input type="checkbox"/> Delete
NAME Robert Simpson	
STREET ADDRESS 1001 Famin Suite 4000	
CITY-ST-ZIP Houston TX 77002	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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*****7650.00 ****150.00**

5/12/00

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Robert G. Simpson** **4/19/2000** **7135176504**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #