

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
RETARY OF STA
IN OF CORPORA
04-12-1999 90034 035 ***150.00
99 AUG -3 PM 1:12

DOCUMENT # P97000105531
SOLID WASTE ENTERPRISES, INC.



Principal Place of Business
3890 W. COMMERCIAL BLVD
SUITE 212
FT. LAUDERDALE, FL 33309
City & State
Zip

Mailing Address
P.O. BOX 388718
MIAMI BEACH FL 33208-0718
US

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified
12/15/1997
4. FEI Number
APPLIED FOR 650873362
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 owes the current year intangible Personal Property Tax. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

CASERTA, RANIERE
5750 COLLINS AVE APT 153
MIAMI BEACH FL 33141

01 Name
JOSEPH M. DEIRA CROCE
02 Street Address (P.O. Box Number is Not Acceptable)
3890 W. COMMERCIAL BLVD
03 SUITE 212
04 FT. LAUDERDALE FL 33309

Pursuant to the provisions of Sections 607.0602 and 607.1606, 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 obligation of, Section 607.0606, Florida Statutes.

Signature of Registered Agent and Sec 7 Applicant

(NOTE: Registered Agent signature required when substituting)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

P
CROCE, JOSEPH D
825 N. OCEAN BLVD APT 1017
POMPANO BEACH FL 33062

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

JOSEPH M. DEIRA CROCE
525 N. OCEAN BLVD APT 1017 P.
POMPANO BEACH FL 33062

Change ☐ Addition ☒

VP
CASERTA, RANIERE
5750 COLLINS AVE
MIAMI BEACH FL 33140

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

RONALD FRANGIONE
6444 FRENCH MUEL TERR
MARCUS, FL

Change ☐ Addition ☒

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change ☐ Addition ☐

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change ☐ Addition ☐

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change ☐ Addition ☐

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change ☐ Addition ☐

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, with all other like empowered.

Signature of Officer or Director