2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000066830

1. Entity Name

ENVIRONMENTAL WASTE STRATEGIES, INC.



FILED Apr 07, 2008 08:00 Al Secretary of State

Principal Place of Business

1704 ROUND POND AVENUE TAMPA, FL 33612

Mailing Address

1704 ROUND POND AVENUE TAMPA, FL 33612



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For S9-3527974 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

RHOADS, RANDY 1704 ROUND POND AVENUE TAMPA, FL 33612

DO NOT WRITE IN THIS SPACE

No Chg-P

				,	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000884774 04/17/08-80057-011 150.00
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP RHOADS, RANDY 1704 ROUND POND AVENUE TAMPA, FL 33612	CTORS			,
TITLE NAME STREET ADDRESS CITY-ST-ZIP					ત
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			-		NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information					

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/1/0.

813.930.2411