

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S05177

FILED
Jan 24, 2008
Secretary of State

Entity Name: MAC-PAC WASTE & RECYCLING SERVICES, INC.

Current Principal Place of Business:

8829 S.W. 49TH ST.
COOPER CITY, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

8829 S.W. 49TH ST.
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 65-0215739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCWILLIAMS, DAVID
2466 ALI BABA AVE
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

MCWILLIAMS, DAVID
8829 SW 49TH ST
COOPER CITY, FL 33328 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: DAVID MCWILLIAMS

01/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCWILLIAMS, DAVID,
Address: 9424 CENTER GATE DR. #301
City-St-Zip: MIRAMAR, FL 33025

Title: VP () Delete
Name: MCWILLIAMS, MARK,
Address: 8829 SW 49 STREET
City-St-Zip: COOPER CITY, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARK MCWILLIAMS

VP

01/24/2008

Electronic Signature of Signing Officer or Director

Date