

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # V23137					
1. Entity Name INDEPENDENT SANITATION, INC.					
Principal Place of Business 2130 N.W. 7TH AVENUE MIAMI FL 33127-4235			Mailing Address P.O. BOX 116 MIAMI FL 33142		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0362485	
5. Certificate of Status Desired ☒				Applied For Not Applicable	
6. Name and Address of Current Registered Agent VERDEJA, MARIO J 2122 N.W. 7TH AVENUE MIAMI FL 33127				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. I am familiar with, and accept, the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE	☐ Change	☐ Add
NAME	VERDEJA, MARIO JR.		NAME		
STREET ADDRESS	2122 N.W. 7TH AVENUE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33127		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change	☐ Add
NAME	VERDEJA, MARIO J		NAME		
STREET ADDRESS	2122 N.W. 7TH AVENUE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33127		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change	☐ Add
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CITY-ST-ZIP	MIAMI FL 33127		CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		



1st MOORE CR2E034 (10/05)

4. FEI Number **65-0362485**

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	VERDEJA, MARIO JR.	
STREET ADDRESS	2122 N.W. 7TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33127	
TITLE	S	☐ Delete
NAME	VERDEJA, MARIO J	
STREET ADDRESS	2122 N.W. 7TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33127	
TITLE	T	☐ Delete
NAME	VERDEJA, MARIO J	
STREET ADDRESS	2122 N.W. 7TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33127	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change	☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	☐ Change	☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	☐ Change	☐ Add
NAME		
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CITY-ST-ZIP		
TITLE	☐ Change	☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	☐ Change	☐ Add
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 Section 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:

Mario Verdeja **MARIO VERDEJA** 2/2/06 305-545-5096

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #