

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
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90128 006 ***150.00

DOCUMENT # V60600

1. Corporation Name

C & R WASTE REMOVAL, INC.

Principal Place of Business

8101 NW 166TH ST
MIAMI FL 33016

Mailing Address

8101 NW 166TH ST
MIAMI FL 33016

2. Principal Place of Business

21 6010 SW 148 AVE

Suite, Apt. #, etc.

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23 FT LAUDERDALE FL

24 33330 25

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2a. Mailing Address

26 6010 SW 148 AVE

Suite, Apt. #, etc.

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28 FT LAUDERDALE FL

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/28/1992

4. FEI Number

65-0353307

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

HOOPER, LARRY K.
29625 SW 177TH AVENUE
HOMESTEAD FL 33030

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME PICCINONNA, CONNIE

STREET ADDRESS 8101 NW 166TH ST.

CITY-ST-ZIP MIAMI FL 33016

TITLE SVP ☐ DELETE

NAME PICCINONNA, CARLO

STREET ADDRESS 8101 NW 166TH ST.

CITY-ST-ZIP MIAMI FL 33016

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 6010 SW 148 AVE

1.4 CITY-ST-ZIP FT LAUDERDALE FL 33330

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 6010 SW 148 AVE

2.4 CITY-ST-ZIP FT LAUDERDALE FL 33330

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/99 974-214-4622

CR2E034 (11/98)