2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014467

Entity Name: ENVIROWASTE SERVICES GROUP, INC.

Current Principal Place of Business:

18001 OLD CUTLER ROAD SUITE 643 PALMETTO BAY, FL 33157

Current Mailing Address:

18001 OLD CUTLER ROAD SUITE 643 PALMETTO BAY, FL 33157 US

FEI Number: 65-0829090

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

	Title	DIRECTOR AND CHAIRMAN	Title	DIRECTOR AND EXECUTIVE VICE
	Name	WILSON, RUSS	Name	PRESIDENT REYNOLDS, STEPHEN
	Address City-State-Zip:	550 S. DIXIE HWY #300 CORAL GABLES FL 33146	Address	550 S. DIXIE HWY #300
			City-State-Zip:	CORAL GABLES FL 33146
	Title	DIRECTOR, EXECUTIVE VICE PRESIDENT, SECRETARY AND GENERAL COUNSEL	Title	DIRECTOR
	Name	GERSHMAN, DAVID	Name	GROSS, JORGE A JR.
			Address	550 S. DIXIE HWY #300
	Address	550 S. DIXIE HWY, #300	City-State-Zip:	CORAL GABLES FL 33146
	City-State-Zip:	CORAL GABLES FL 33146	T :4.	
	Title	DIRECTOR AND CHIEF EXECUTIVE OFFICER	Title	CORPORATE SECRETARY
			Name	ORR, DAVID
	Name	LONG, JIM	Address	18001 OLD CUTLER ROAD SUITE 643
	Address	18001 OLD CUTLER ROAD SUITE 643	City-State-Zip:	PALMETTO BAY FL 33157
	City-State-Zip:	PALMETTO BAY FL 33157	Title	ASSISTANT SECRETARY
	Title	CFO	Name	CALDERON, MICHELSA
	Name	BOURHIS, MARC	Address	550 S. DIXIE WAY, #300
	Address	18001 OLD CUTLER ROAD SUITE 643	City-State-Zip:	CORAL GABLES FL 33146
	City-State-Zip:	PALMETTO BAY FL 33157	Continues o	n page 2

I hereby 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 all other like empowered.

SIGNATURE: MICHELSA CALDERON

01/23/2024 ASSISTANT SECRETARY

Electronic Signature of Signing Officer/Director Detail

FILED Jan 23, 2024 Secretary of State 5491915578CC

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FOJON, JULIO
Address	18001 OLD CUTLER ROAD SUITE 643
City-State-Zip:	PALMETTO BAY FL 33157