

State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

Annual Report for the year: **2021**  
 Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2021 MAY 20 PM 12:49

1. Entity ID Number <b>000796161</b>		2. Exact name of the Corporation <b>VALET WASTE HOLDINGS, INC.</b>			
3. Principal Office Address <b>100 S. ASHLEY DRIVE #700</b>			City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>
4. NAICS Code <b>562111</b>		6. Brief description of the character of business conducted in Rhode Island <b>DOOR STEP TRASH COLLECTION FOR MULTIFAMILY COMMUNITIES</b>			
5. State of Incorporation <b>DE</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
President Name <b>P. SHAWN HANDRAHAN</b>			Vice-President Name		
Street Address <b>100 S. ASHLEY DRIVE #700</b>			Street Address		
City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>	City	State	Zip
Secretary Name <b>ISORYS DILONE</b>			Treasurer Name <b>STEVE DAVIS</b>		
Street Address <b>100 S. ASHLEY DRIVE #700</b>			Street Address <b>100 S. ASHLEY DRIVE #700</b>		
City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>	City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
Director Name <b>P. SHAWN HANDRAHAN</b>			Director Name <b>JEFF SHEU</b>		
Street Address <b>100 S. ASHLEY DRIVE #700</b>			Street Address <b>100 S. ASHLEY DRIVE #700</b>		
City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>	City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>
Director Name <b>HOON CHO</b>			Director Name <b>MIKE STUPLER</b>		
Street Address <b>100 S. ASHLEY DRIVE #700</b>			Street Address <b>100 S. ASHLEY DRIVE #700</b>		
City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>	City <b>TAMPA</b>	State <b>FL</b>	Zip <b>33602</b>
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		100.00		PWP	
		26,108.00.00		CWP	
		PAR VALUE			
				0.0100	
				0.0010	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
Name of Authorized Representative <b>P. SHAWN HANDRAHAN</b>				Date <b>3-25-21</b>	
Signature of Authorized Representative 					

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**

**12:53**

**MAY 20 2021**

BY **QWGXNTC**

FORM 530 - Revised: 10/2017