

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 171867

FILED
Jan 09, 2007
Secretary of State

Entity Name: GULF COAST RECYCLING, INC.

Current Principal Place of Business:

1901 NORTH 66TH STREET
TAMPA, FL 33619

New Principal Place of Business:

186 NORTH AVENUE EAST
CRANFORD, NJ 07016

Current Mailing Address:

% METALICO, INC.
186 NORTH AVENUE E.
CRANFORD, NJ 07016

New Mailing Address:

FEI Number: 59-0690405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AGUERO, CARLOS E
Address: 186 N AVE E
City-St-Zip: CRANFORD, NJ 07016

Title: VPD () Delete
Name: DRURY, MICHAEL J
Address: 186 N AVE E
City-St-Zip: CRANFORD, NJ 07016

Title: VPTD () Delete
Name: FINLAYSON, ERIC W
Address: 186 N AVE E
City-St-Zip: CRANFORD, NJ 07016

Title: SEC () Delete
Name: GRABER, ARNOLD S
Address: 186 N AVE E
City-St-Zip: CRANFORD, NJ 07016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: KEVIN WHALEN

VP

01/09/2007

Electronic Signature of Signing Officer or Director

Date