


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90169 034 ***150.00

DOCUMENT # F97000002522 1. Entity Name FLORIDA RECYCLING SERVICES OF DELAWARE, INC.	
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Principal Place of Business 1099 MILLER DRIVE ALTAMONTE SPRINGS FL 32701 US	Mailing Address 1122 INTERNATIONAL BLVD, STE 601 BURLINGTON ONT CAN L7L 6Z8,
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 1122 INTERNATIONAL BLVD. 601
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City & State City & State BURLINGTON, ONTARIO	4. FEI Number 65-0735186	Applied For <input type="checkbox"/> Not Applicable
Zip L7L 6Z8	Country CANADA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P NAME WILCOX, CHARLES A STREET ADDRESS 1122 INTERNATIONAL BLVD., STE. 601 CITY-ST- ZIP BURLINGTON ONT. L7L 6Z8,	<input type="checkbox"/> Delete	TITLE P/D NAME WILCOX, CHARLES A. STREET ADDRESS 7025 E. GREENWAY PKWY., SUITE 100 CITY-ST- ZIP SCOTTSDALE, AZ 85254	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPS NAME CAIRNS, IVAN R STREET ADDRESS 1122 INTERNATIONAL BLVD., STE. 601 CITY-ST- ZIP BURLINGTON ONT. L7L 6Z8,	<input type="checkbox"/> Delete	TITLE V/S/D NAME CAIRNS, IVAN R. STREET ADDRESS 1122 INTERNATIONAL BLVD., SUITE 601 CITY-ST- ZIP BURLINGTON, ONTARIO L7L 6Z8 CANADA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPT NAME RUBIN, RONALD L STREET ADDRESS 1122 INTERNATIONAL BLVD., STE. 601 CITY-ST- ZIP BURLINGTON ONT. L7L 6Z8,	<input type="checkbox"/> Delete	TITLE V/D NAME RUBIN, RONALD L. STREET ADDRESS 7025 E. GREENWAY PKWY., SUITE 100 CITY-ST- ZIP SCOTTSDALE, AZ 85254	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE AS NAME GOEBEL, BRIAN A STREET ADDRESS 1122 INTERNATIONAL BLVD., STE. 601 CITY-ST- ZIP BURLINGTON, ONT. L7L 6Z8,	<input type="checkbox"/> Delete	TITLE V/C NAME GOEBEL, BRIAN A. STREET ADDRESS 7025 E. GREENWAY PKWY., SUITE 100 CITY-ST- ZIP SCOTTSDALE, AZ 85254	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME MUTER, KIRK STREET ADDRESS 1122 INTERNATIONAL BLVD., STE. 601 CITY-ST- ZIP BURLINGTON, ONT. L7L 6Z8,	<input checked="" type="checkbox"/> Delete	TITLE V NAME MUTER, KIRK W. STREET ADDRESS 1451 WEST CYPRESS CREEK RD., SUITE 300 CITY-ST- ZIP FORT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE RC NAME MAY, KEVIN STREET ADDRESS 1122 INTERNATIONAL BLVD., STE. 601 CITY-ST- ZIP BURLINGTON, ONT. L7L 6Z8,	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: Ivan R. Cairns **Ivan R. Cairns** **VP & Secretary** **April 18, 2005** **905-319-6056**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #