


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90743 044 ***150.00

DOCUMENT # P0000099250

1. Entity Name
DELTA DADE RECYCLING CORP.



Principal Place of Business
2075 N POWERLINE RD
POMPANO BEACH, FL 33069

Mailing Address
2075 N POWERLINE RD
POMPANO BEACH, FL 33069

90123156

2. Principal Place of Business
15880 N. Greenway-Hayden Loop

3. Mailing Address
15880 N. Greenway-Hayden Loop

Suite, Apt. #, etc.
Suite #100



CHECK HERE IF MAKING CHANGES

City & State
Scottsdale, Arizona

City & State
Scottsdale, Arizona

Zip
85260

Country
US

4. FEI Number
65-1048925

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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

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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when applicable.)



9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FOREMAN, PHILLIP 2075 N POWERLINE ROAD POMPANO BEACH, FL 33069 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROBERTS, THOMAS R 2076 N POWERLINE ROAD POMPANO BEACH, FL 33069 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS MARZANO, MICHAEL C 2075 N POWERLINE ROAD POMPANO BEACH, FL 33069 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARZANO, ANGELO 2075 N POWERLINE ROAD POMPANO BEACH, FL 33069 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Bruce W. Emley 323 Marble Mill Road Marietta, Georgia 30060 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary Bruce Roy 323 Marble Mill Road Marietta, Georgia 30060 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President Donald W. Slager 15880 N. Greenway-Hayden Loop, #100 Scottsdale, AZ 85260 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Donald W. Slager 15880 N. Greenway-Hayden Loop, #100 Scottsdale, AZ 85260 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Thomas P. Martin 15880 N. Greenway-Hayden Loop, #100 Scottsdale, AZ 85260 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Thomas P. Martin 15880 N. Greenway-Hayden Loop, #100 Scottsdale, AZ 85260 <input type="checkbox"/> Change <input checked="" 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: Jo Lynn White **Jo Lynn White, Secretary** 4/22/03 (480) 627-2700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Case Daytime Phone #

CFR2E034 (10/02)

Attachment
90123156

Attachment to State of Florida Uniform Business Report for
Delta Dade Recycling Corp.
Document # P00000099250

List of Additional Officers and Directors of the Corporation:

Name: Dale L. Parker
Title: Vice President
Business Addr: 15880 North Greenway-Hayden Loop, Suite #100
Scottsdale, Arizona 85260

Name: Jo Lynn White
Title: Secretary
Business Addr: 15880 North Greenway-Hayden Loop, Suite #100
Scottsdale, Arizona 85260

Name: Jenny Lynn Apker
Title: Assistant Secretary
Business Addr: 15880 North Greenway-Hayden Loop, Suite #100
Scottsdale, Arizona 85260

Name: James Edward Gray
Title: Director
Business Addr: 15880 North Greenway-Hayden Loop, Suite #100
Scottsdale, Arizona 85260