

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000005849**

1. Corporation Name
ANGELUS SANITARY CAN MACHINE COMPANY

Principal Place of Business

Mailing Address

**4900 PACIFIC BLVD.
LOS ANGELES, CA 90058**

2. Principal Place of Business:

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

12-1-1995

4. FEI Number

95-0498670

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of signatory (delete if not applicable)

Signature typed or printed name of signatory (delete if not applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ CEO/Director ☐ DELETE
NAME **Otto Heck**
STREET ADDRESS **4900 Pacific Blvd.**
CITY-STATE-ZIP **Los Angeles, CA 90058**

1.1 TITLE ☒ Director ☐ Change ☐ Addition
1.2 NAME **George Koeberle**
1.3 STREET ADDRESS **4900 Pacific Blvd.**
1.4 CITY-STATE-ZIP **Los Angeles, CA 90058**

TITLE ☒ Executive VP Eng. & Sales ☐ DELETE
NAME **Maurice Koeberle**
STREET ADDRESS **4900 Pacific Blvd.**
CITY-STATE-ZIP **Los Angeles, CA 90058**

2.1 TITLE ☒ Director ☐ Change ☐ Addition
2.2 NAME **Joseph Battaglia**
2.3 STREET ADDRESS **4900 Pacific Blvd.**
2.4 CITY-STATE-ZIP **Los Angeles, CA 90058**

TITLE ☐ Executive VP Operations ☐ DELETE
NAME **Dale Hoefer**
STREET ADDRESS **4900 Pacific Blvd.**
CITY-STATE-ZIP **Los Angeles, CA 90058**

3.1 TITLE ☒ Director ☐ Change ☐ Addition
3.2 NAME **Dick Milliken**
3.3 STREET ADDRESS **4900 Pacific Blvd.**
3.4 CITY-STATE-ZIP **Los Angeles, CA 90058**

TITLE ☐ VP Human Relations ☐ DELETE
NAME **Wiley Fain**
STREET ADDRESS **4900 Pacific Blvd.**
CITY-STATE-ZIP **Los Angeles, CA 90058**

4.1 TITLE ☐ ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE ☐ Vice President Sales ☐ DELETE
NAME **Saul Restrepo**
STREET ADDRESS **4900 Pacific Blvd.**
CITY-STATE-ZIP **Los Angeles, CA 90058**

5.1 TITLE ☐ ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ Chief Financial Officer ☐ DELETE
NAME **Robert Davis**
STREET ADDRESS **4900 Pacific Blvd.**
CITY-STATE-ZIP **Los Angeles, CA 90058**

6.1 TITLE ☐ ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

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*****225.00**

6/19/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

R. L. Davis CFO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFO

20583.2171

CR2E034 (12/95)