

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H03774

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** A & S OIL RECOVERY OF FLORIDA, INC.

**Current Principal Place of Business:**

4601 8TH AVE.S.  
ST. PETERSBURG, FL 33711 US

**New Principal Place of Business:**

**Current Mailing Address:**

1097 62ND TERRACE S.  
ST. PETERSBURG, FL 33705 US

**New Mailing Address:**

**FEI Number:** 59-2410214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AMARAL, FRANK  
1097 62ND TERRACE SOUTH  
ST. PETERSBURG, FL 33705 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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** AMARAL, FRANK  
**Address:** 1097 62ND TERR. SO.  
**City-St-Zip:** ST. PETERSBURG, FL 33705

**Title:** DV  
**Name:** AMARAL, JULIE  
**Address:** 1097 62ND TERR. SO.  
**City-St-Zip:** ST. PETERSBURG, FL 33705

I hereby 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 all other like empowered.

**SIGNATURE:** JULIE ANNE AMARAL

V/P

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date