2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT DOCUMENT # L04000032553 1. Entity Name SUNRISE RECYCLING, LLC			Mar 28, 2008 08:00 A Secretary of State	
700 N.W. 21	Dee of Business Mailing Address 1 TERRACE 951 SW 4TH AVE ERDALE, FL 33311 BOCA RATON, FL 33432		F (40 (100) 1 (1) (100) 1 (100) 1 (100) 1 (100) 1 (100) 1 (100) 1 (100) 1 (100)	
			03182008 No Chg-LLC CR2E083 (12/07)	
	DO NOT WRITE IN THIS SP	ACE	4. FEI Number Applied For	
•		1. 1. N. N.	20-1104912 Not Applicable	
	Name and Address of Current Registered Agent	*	5. Certificate of Status Desired Fee Required	
DI AVEOR			The company of the control of the same of the control of the same of the control of the same of the control of	
BLAKESBERG, JON D 951 S.W. FOURTH AVENUE			DO NOT WRITE	
BOCA RA	ITON, FL 33432	tr.	IN THIS SPACE	
	e named entity submits this statement for the purpose of changing its regi tions of registered agent.	stered office or registere	ed agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable 4, 1, (NOTE: Reg	istered Agent signature required	when reinstating) DAYE	
FILI	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	and the second s	U00000873191 04/10/08-80068-008 138.75	
9.	MANAGING MEMBERS/MANAGERS		!	
NAME STREET ADDRESS CITY-ST-ZIP	MGRM: DEACH TO THE MARTINO, JAMES A TOO'N.W. 21 TERRACE FORT LAUDERDALE, FL 33311			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· 1 ⁸		
TITLE		_		
STREET ADDRESS CITY-ST-ZIP		k y * .95 2 (8 ³ 2) 4 (8)	DO NOT WRITE	
TITLE NAME		,	IN THIS SPACE	
STREET ADDRESS CITY+ST-7IP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
TITLE NAME				
STREET ADDRESS CITY-ST-ZIP		A h		
TITLE NAME		, et		
STREET ADDRESS CITY-ST-ZIP		P.	the many states of the second	
indicated	certify that the information supplied with this filing does not qualify for the don this report is true and accurate and that my signature shall have the ability company or the receiver or trustee empowered to execute this report to the company or the receiver or trustee empowered to execute this report to the company or the company or trustee empowered to execute this report to the company or the company or trustee empowered to execute this report to the company or the company or trustee empowered to execute this report to the company or t	same legal effect as if	made under oath; that I am a managing member or manager of the	
SIGNAT	TUPE:		2/12/	

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED