

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L12324

FILED
Mar 20, 2007
Secretary of State

Entity Name: AIRPORT RECYCLING SPECIALISTS, INC.

Current Principal Place of Business:

AIRPORT RECYCLING SPECIALIST, INC
3551 SW 2ND AVE
FT. LAUDERDALE, FL 33315 US

New Principal Place of Business:

Current Mailing Address:

% DONALD J. DUERR
731 N.W. 93RD AVENUE
PEMBROKE PINES, FL 330246332

New Mailing Address:

FEI Number: 65-0139678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUERR, DONALD J.
731 N.W. 93RD AVENUE
PEMBROKE PINES, FL 33024 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUERR, DONALD J.,
Address: 731 NW 93RD AVE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP () Delete
Name: DUERR, DAVID A
Address: 2290 SW 44 ST.
City-St-Zip: DANIA BCH, FL 33312

Title: D () Delete
Name: DUERR, DONALD J JR.
Address: 133 SO. FREEMONT
City-St-Zip: PINEDALE, WY 829411668

Title: D () Delete
Name: SNOW, KATHLEEN
Address: 334 JUSTIN DR.
City-St-Zip: WOODSTOCK, GA 30188

Title: ST () Delete
Name: DUERR, CAROLE A
Address: 731 NW 93RD AVE
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID A. DUERR

VP

03/20/2007

Electronic Signature of Signing Officer or Director

_____ Date