

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

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90021 014 ***150.00

DOCUMENT # P01000034688
1. Entity Name A&B Container & Recovery Corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1708 S.W. 31st Avenue Suite, Apt. #, etc.	3. Mailing Address 3146 NW 68th Street Suite, Apt. #, etc.
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City & State Pembroke Park, FL	City & State Fort Lauderdale, Florida	4. FEI Number 65-0196394	Applied For <input checked="" type="checkbox"/> Not Applicable
Zip 33009	Country USA	Zip 33309-1206	Country USA
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Mr. Gerald Anderson
Street Address (P.O. Box Number is Not Acceptable) 1708 SW 31st Avenue
City Pembroke Park
State FL
Zip Code 33009

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  **Gerald Anderson** **1/16/2008**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

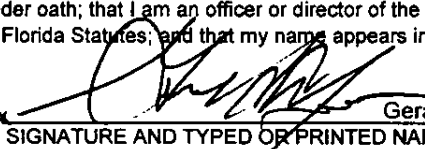
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/CEO/Chair Gerald Anderson 1708 SW 31st Avenue Pembroke Park, Florida 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Advisor/Consultant Clifton H. Rodriguez, CPA 3146 NW 68th Street, Suite No.1 Fort Lauderdale, Florida 33309-1206
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12. 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **Gerald Anderson, CEO** **1/16/2008** **(954)987-5553**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #