

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128296

Entity Name: RECYCLETEC, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

1396 TECHNOLOGY DRIVE
BARNWELL, SC 29812 US

New Principal Place of Business:

Current Mailing Address:

1396 TECHNOLOGY DRIVE
BARNWELL, SC 29812 US

New Mailing Address:

7820 PROFESSIONAL PL,
STE 3
TAMPA, FL 33637 US

FEI Number: 82-0577001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANN, RALPH
6105 GALLEON WAY
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

MANN, RALPH
7820 PROFESSIONAL PLACE
STE 3
TAMPA, FL 33637 US

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:

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALONGE, JOSEPH
Address: 6105 GALLEON WAY
City-St-Zip: TAMPA, FL 33615

Title: V () Delete
Name: MANN, RALPH
Address: 6105 GALLEON WAY
City-St-Zip: TAMPA, FL 33615

Title: CFO () Delete
Name: FOX, RICK
Address: 661 SHERIDAN RD.
City-St-Zip: WINNETKA, IL 60093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANN, RALPH
Address: 7820 PROFESSIONAL PLACE, STE 3
City-St-Zip: TAMPA, FL 33637

Title: V (X) Change () Addition
Name: ALONGE, JOSEPH
Address: 7820 PROFESSIONAL PLACE, STE 3
City-St-Zip: TAMPA, FL 33637

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 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 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: RALPH MANN

P

04/25/2005

Electronic Signature of Signing Officer or Director

Date