

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P0300008513Q**

1. Entity Name  
**EAGLE RECYCLING SYSTEMS, INC.**



Principal Place of Business  
**400 BEACH ROAD  
JUPITER ISLAND, FL 33469**

Mailing Address  
**400 BEACH ROAD  
JUPITER ISLAND, FL 33469**



01052005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**54-2132159**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**MARANGI, NICHOLAS  
400 BEACH ROAD  
JUPITER ISLAND, FL 33469**

**DO NOT WRITE  
IN THIS SPACE**

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 Nicholas F. Marangi

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

January 6, 2005  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000182510  
01/19/05-80029-023 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	MARANGI, NICHOLAS
STREET ADDRESS	400 BEACH ROAD
CITY-ST-ZIP	JUPITER ISLAND, FL 33469
TITLE	SEC
NAME	IOMMETTI, CHESTER
STREET ADDRESS	801 H SABAL RIDGE CIRCLE
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nicholas F. Marangi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 6, 2005  
Date

845-629-0135  
Daytime Phone #