2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000088463

Entity Name: AA-1 RECYCLING, INC.

FILED Feb 26, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1812 MORGAWA RD 700 E. UNION STREET JACKSONVILLE, FL 32211

SUITE H2

JACKSONVILLE, FL 32206

Current Mailing Address: New Mailing Address:

700 E. UNION STREET 1812 MORGAWA RD **BOX 28** JACKSONVILLE, FL 32211

JACKSONVILLE, FL 32206

FEI Number: 22-3936591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TURNER, ROBERT M TURNER, ROBERT M 700 E. UNION STREET 1812 MORGAWA RD

JACKSONVILLE, FL 32211 SUITE H2 US JACKSONVILLE, FL 32206 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: ROBERT M. TURNER 02/26/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete TURNER, ROBERT M Name: 1812 MORGAWA RD Address: City-St-Zip: JACKSONVILLE, FL 32211

Title: () Delete TURNER, ANN H Name: 1812 MORGAWA RD Address: JACKSONVILLE, FL 32211 City-St-Zip:

() Delete Title: HEBERT, AIMEE Name: 1812 MORGAWA RD Address: City-St-Zip: JACKSONVILLE, FL 32211 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title:

TURNER, ANN H Name:

700 E. UNION STREET, BAY H2 Address: City-St-Zip: JACKSONVILLE, FL 32206

Title: VΡ (X) Change () Addition

Name: TURNER, ROBERT M

700 E. UNION STREET, BAY H2 Address: JACKSONVILLE, FL 32206 City-St-Zip:

Title: (X) Change () Addition Name: HEBERT, ROBERT A

700 E. UNION STREET, BAY H2 Address: City-St-Zip: JACKSONVILLE, FL 32206

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: ANN H TURNER 02/26/2008