

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P29810 (9)

1. Corporation Name

AMERECYCLE, INC.

Principal Place of Business

602 THIRD STREET E.
SUITE C
BRADENTON FL 34206

Mailing Address

602 THIRD STREET E.
SUITE C
BRADENTON FL 34206



2. Principal Place of Business

2a. Mailing Address

21 802 11th Street West
Suite, Apt. #, etc.

26 P.O. Box 9416
Suite, Apt. #, etc.

22 City & State
BRADENTON FL

27 City & State
BRADENTON FLORIDA

23 Zip Country
34205 FLORIDA

28 Zip Country
34206 FLORIDA

9. Name and Address of Current Registered Agent

GIORDANO, JOHN N.
220 SOUTH FRANKLIN STREET
TAMPA FL 33602

3. Date Incorporated or Qualified
06/15/1990

3a. Date of Last Report
05/01/1995

4. FEI Number
59-3000313

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name: EDUARDO VOGLER II
82 Street Address (P.O. Box Number is Not Acceptable):
802 11th Street West
83
84 City: BRADENTON FL 85 Zip Code: 34205

11. Pursuant to the provisions of Sections 607.0502 and 607.503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to the address of record. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and agree to, the provisions of Sections 607.0502 and 607.503, Florida Statutes.

SIGNATURE

Signature of the person filing this statement

EDUARDO VOGLER II

4-18-96

12. OFFICERS AND DIRECTORS

TITLE: ☒ DELETE
NAME: EISCO, JOSEPH A.
STREET ADDRESS: 1000 WASHINGTON STREET
CITY-STATE-ZIP: NORWOOD MA 02062

TITLE: ☐ DELETE
NAME: JONES, JERRY H
STREET ADDRESS: 1 JADA LANE
CITY-STATE-ZIP: GREENWICH CT 06830

TITLE: ☐ DELETE
NAME: GOLDBERG, STEPHEN R
STREET ADDRESS: 602 THIRD STREET E., SUITE C
CITY-STATE-ZIP: BRADENTON FL

TITLE: ☐ DELETE
NAME: JOUKOWSKY, ARTEMIS A
STREET ADDRESS: 50 BRADFORD RD
CITY-STATE-ZIP: WELLESLEY MA

TITLE: ☐ DELETE
NAME: JOUKOWSKY, MICHAEL
STREET ADDRESS: 8 CUSHING ST
CITY-STATE-ZIP: PROVIDENCE RI

TITLE: ☐ DELETE
NAME: WARE, WILLIAM
STREET ADDRESS: 100 PROSPECT ST
CITY-STATE-ZIP: SHERBORN MA 01770

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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, the receiver or liquidator employed to examine this report as required by Chapter 637, Florida Statutes, and that my name appears in Block 12 or Block 13 if it is a new or an additional name with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
STEPHEN R. GOLDBERG

4/13/96

813-345-0322

CR2E034 (12/95)