

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P34646

1. Entity Name

MOBIL PLASTICS RECYCLING CORP.

Principal Place of Business

Mailing Address

3225 GALLOWES ROAD  
FAIRFAX VA 22037  
US

3225 GALLOWES ROAD  
STATE TAX DEPT.  
FAIRFAX VA 22037-0001  
US

2. Principal Place of Business

3. Mailing Address

800 Bell Street

Suite, Apt. #, etc.

State Tax Dept.

City & State

Houston, TX

Zip

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FILED  
Apr 21, 2000 8:00 am  
Secretary of State

04-21-2000 90137 021 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 75-1838299 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME TRENT, J M  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AC ☐ Delete  
NAME OLSON, C.T.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 800 Bell Street  
CITY-ST-ZIP Houston, TX 77002

TITLE S ☐ Delete  
NAME STEVENSON, P. A.  
STREET ADDRESS 3255 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME RUFF, C.D.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AT ☐ Delete  
NAME SARNOWSKI, J.A.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AC ☐ Delete  
NAME LOPEZ, S.A.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 800 Bell Street  
CITY-ST-ZIP Houston, TX 77002

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

S. A. Lopez, Asst. Controller, 04-10-00 (713) 656-1807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)