FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

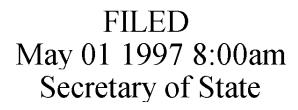
1997

DOCUMENT # P93000049615 (6)

AG-RE-CYCLE INDUSTRIES, INC.

Principal Place of Business

Mailing Address





3300 S.W. 60TH AVE. OCALA FL 34476		PO BOX 771104 NA OCALA FL 34477 US					
					3. Date Incorporated or Qualified 07/15/1993	3a. Date of Lat 06/12/1996	
	Place of Business OSWSTRd 200	2a. Mailing Address			4. FEI Number		Applied For
21 6240 Suite, Apt.		26 Suite, Apt. #, etc.			59-3201893		Not Applicable
22 27					5. Certificate of Status Desired	1 4 '	5 Additional Required
City & State City & State City & State City & State 28					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 344		Zip 29	Counti	У		Yes 🗌 No	er s. 199.032,
701	Name and Address of Currer	nt Registered Agent		:T.:	10. Name and Address of New Re	istered Agent	
	A, FRANK J		8	Name			
3300 S.W. 80 AVE. OCALA FL 34476				Street Add	dress (P.O. Box Number is Not Acceptab	le)	*** * * *
			83	3		 	
			84	1 City		05 7	rp Code
				'			
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig-	of Florida. Such change was	s authorized b	ov the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changin t the appointment	g its registered as registered
SIGNATURE	Block and a second a second and						
12.	Signature, typed or printed name of registered ago OFFICERS AN		OTE: Registered Ac	gent signature requ	ured when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE EDS AND DIRECT	OBS IN 12
TITLE	D	DELETE	1.1 101.6	•	, as the most reference to strict	☐ Chan	
NAME	TONA, FRANK J		1.2 NAME				· ——
STREET ADDRESS	3300 S.W. 60TH AVE.		1.3 STHEE	1 AODRESS			
CITY-ST-ZIP	OCALA FL 34476		1.4 CITY-	ST-7IP			
TITLE	D DOMESTIC	DETEJE	2 1 1 ITLE			Chan	ge
NAME	RICCIARDI, DOMINIC 300 FT WASHINGTON AVE., AF	NT EC	2.8 NAME				
STREET ADDRESS	NEW YORK NY 10032	1. 30		T ADDRESS			
CITY-ST-ZIP TITLE	D	DELLTE	2.4 CHY-	-S1 - ZIP		☐ Chan	ge Addition
NAME	TONA, CHARLES		3.2 NAME			Crian	ge [_] Addition
STREET ADDRESS	14481 S.W. 47 CT.			T ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33334		3.4. C(TY-				
TITLE		DELFTE	4.1 TITLE			☐ Chane	ge 🔲 Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREE	1 ADORESS			
CITY-ST-ZIP		T March	4.4 CITY-	ST-ZIP			<u> </u>
title Name		☐ DELETE	5.1 TOLE			Chang	ge Addition
STREET ADDRESS			5.2 NAME	T *DODECC			
CITY-ST-ZIP				T ADDRESS			
TITLE	<u> </u>	☐ DELETE	5.4 CHY- 6.1 TITLE	31-211		Chang	e Addition
NAME			6.2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			64 CITY-				
M. Lela hazal	bu a get if u that the information and the	J. 20 11 Ct. 1			11. 0 11. 440.034044 (1. 11. 0)		····

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name