FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

ANNUAL REPORT

1995

APPROVED AND FILED

95 MAY -1 PM 5:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000052307 (4)

1. Corporate Name

VIKING RECYCLING, INCORPORATED

Principal Place of Business	Mailing Address
4332 W WATERS AVE SUITE 104-B TAMPA FL 33614	4332 W WATERS AVE SUITE 104-B TAMPA FL 33614

(DO NOT WRITE IN THIS SPACE)

3. Date of Incorporation or Qualification: 07/27/1993

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21

26. Mailing Address — 26

4. FEI Number: 59-3195237 — Applied For / Not Applicable

Suite, Apt. # or Other — 22

Suite, Apt. # or Other — 27

5. Certificate of Status Desired: X — $8.75 Additional Fee Required

City & State — 23

City & State — 28

6. Election Campaign Financing Trust Fund Contribution: ☐ — $5.00 May Be Added to Fees

Zip — 24 — County — 25 — Zip — 29 — County — 30

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ERICKSON, DAN O 4332 W WATERS AVE SUITE 104-B TMAMPA FL 33614	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and/or 1005, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

Signature(s)

12. OFFICER AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IN U
Title	DPC	☐ Change ☐ Addition
Name	TAYLOR, MARK	
Address	11419 PALM PASTURE DR	
City-St-Zip	TAMPA FL	
Title	DVC	☐ Change ☐ Addition
Name	ERICKSON, DAN O	
Address	5000 S HIMES AVE #332	
City-St-Zip	TAMPA FL	
Title	DVP	☐ Change ☐ Addition
Name	PENNINGTON, TIMOTHY L	
Address	187 INLET DR.	
City-St-Zip	ST. AUGUSTINE FL	
Title	DVP	☐ Change ☐ Addition
Name	HAWKINS, RONALD L	
Address	3315 CHERIOT DR.	
City-St-Zip	TAMPA FL	
Title		☐ Change ☐ Addition
Name		
Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Address		
City-St-Zip		

14. I hereby 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 12 or Block 13 with an address.

SIGNATURE: Dan O. Erickson — 4-27-95 — 813-882-4020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dan O. Erickson

Date — Daytime Telephone Number

0297422 CP