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FILED
Mar 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000014697 (4)

1. Corporation Name
TIRE RECYCLING SYSTEMS, INC.

Principal Place of Business
616 N.W. 2ND AVE.
FT. LAUDERDALE FL 33311

Mailing Address
101 NE 3RD AVE
SUITE 300
FT LAUDERDALE FL 33301
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/23/1994

4. FEI Number
65-0476585
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

6. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

LABATE, MARK J
101 NE 3RD AVE
SUITE 300
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name LABATE, Mark J.

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

83 800 SE 3rd Ave,

Ste. 300

84 City Ft. Lauderdale

FL 85 Zip Code 33316

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
BOLTON, THOMAS A
616 N.W. 2ND AVE.
FT. LAUDERDALE FL 33301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPSD
LABATE, MARK J
101 NE 3RD AVE SUITE 300
FT LAUDERDALE FL 33301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPAS
LABATE, SILVANA D
101 NE 3RD AVE SUITE 300
FT LAUDERDALE FL 33301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

11/9/98 (954) 728-3466

CR2E034 (10/97)