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

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Mar 14 1997 8:00am

Secretary of State

Addition

DOCUMENT # P94000070506 (8)

A & E TRASH REMOVAL & GRADING, INC.

Principal Place of Business Mailing Address 10191 WEST SAMPLE ROAD 10191 WEST SAMPLE ROAD SUITE 205B SUITE 2058 **CORAL SPRINGS FL 33065** CORAL SPRINGS FL 33065-3959 3a. Date of Last Report 3. Date Incorporated or Qualified 09/26/1994 08/07/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0557239 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation has liability for intaggible tax under s. 199.032 ☐ No **⊘**/fes 24 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RUBINCHIK, HARVEY L 1776 N PINE ISLAND RD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 118** 83 PALM BEACH FL 84 Zip Code 85 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 Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Horida Statutes. SIGNATURE (NOTE: Registered Agont signature required when reinstating) Signature, typed or proceed now out they stelled agreed and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE Change Addition TITLE 1.1 1016 FARACHE, AHRON NAME 1.2 NAME 21300 CHINABERRY DR STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP 1.4 CITY-S1-7IP TT DELETE Change Addition TITLE 2111111 FARACHE, ESMERALDA NAME 2.2 NAME 21300 CHINABERRY DR STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP 2 4 CiTY - \$1 - 7IP DELETE Change Addition TITLE 3 1 1011 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - 7IP DELETE Change Addition TITLE 411011 NAME 4. 2 NAMI STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY - \$1 - ZIP ____ Addition DELETE Change TITLE 5.1 TITLE

14. Ido 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 a man 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.

5.2 NAME

61 HILE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CHY+S1-ZIP

6.3 STREET ADDRESS