

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra D. McElham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # P95000031036

1. Corporation Name

ACME RECYCLING CORPORATION

Principal Place of Business

Meeting Address

258 E. ALTAMONTE DR. 258 E. ALTAMONTE DR.
ALTAMONTE SPRINGS, FL ALTAMONTE SPRINGS, FL
32701 32701

2. Principal Place of Business

2a. Meeting Address

21 1096 BAILEY HILL RD.

26 430 ANCHOR RD.

County, April 1, 1997

County, April 1, 1997

22 City & State

27 City & State

23 PLYMOUTH, FL.

28 CASSELBERRY, FL.

Zip

Country

Zip

Country

24 32768

25 ORANGE

29 32707

30 SEMINOLE

9. Name and Address of Current Registered Agent

10. Name and Address of How Registered Agent

ROYCE PIPKINS
258 E. ALTAMONTE DRIVE
ALTAMONTE SPRINGS, FL. 32701

81 Name HERMAN FIELDS
82 Street Address (P.O. Box Number is Not Acceptable) 430 ANCHOR ROAD
83
84 City CASSELBERRY FL 85 Zip Code 32707

11. Pursuant to the provisions of Sections 607.02 and 607.03, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both to the State of Florida. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Her name is Herman Fields and he is a resident of the State of Florida.

SIGNATURE

- HERMAN FIELDS 4-30-97

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS BY 12

1111 D
1112 ROYCE PIPKINS
1113 STREET ADDRESS 258 E. ALTAMONTE DR.
1114 CITY ST ZIP ALTAMONTE SPRINGS, FL 32701

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1113 STREET ADDRESS
1114 CITY ST ZIP

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1113 STREET ADDRESS
1114 CITY ST ZIP

1111 P, S, D
1112 EUGENE ROBISON
1113 STREET ADDRESS 430 ANCHOR ROAD
1114 CITY ST ZIP CASSELBERRY, FL. 32707

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1112
1113 STREET ADDRESS
1114 CITY ST ZIP

1111 V, T, D
1112 HERMAN FIELDS
1113 STREET ADDRESS 430 ANCHOR ROAD
1114 CITY ST ZIP CASSELBERRY, FL. 32707

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1114 CITY ST ZIP

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a word under oath. That I pay an officer or director of the corporation or the registered agent 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 my checkmark with an address.

SIGNATURE: Herman Fields - HERMAN FIELDS - VP 4-30-97 (407) 339-3773

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

File

Register Number

CR2E034 (9/96)