FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996 2-29-96 B-1689-C

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

DOCUMENT # P95000033164 (1)

1. Corporation Name
H.I.P. RERECYCLING (FLA), INC.

Principal Place of Business
2141 MAIN STREET UNIT 1
DUNEDIN FL 34698

Mailing Address
2141 MAIN STREET UNIT 1
DUNEDIN FL 34698

3. Date Incorporated or Qualified: 04/27/1995

3a. Date of Last Report

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-3347483 — 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

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

9. Name and Address of Current Registered Agent
VARICHAK-CRUPI, DEBRA
255 SUNSET DRIVE NORTH
ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent
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 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: DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	VARICHAK-CRUPI, DEBRA
STREET ADDRESS	255 SUNSET DRIVE NORTH
CITY, ST, ZIP	ST. PETERSBURG FL 33710
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D ☒ Change ☐ Addition
1.2 NAME	VARICHAK-CRUPI, DEBRA
1.3 STREET ADDRESS	255 SUNSET DRIVE NORTH
1.4 CITY, ST, ZIP	ST. PETERSBURG, FL 33710
2.1 TITLE	V/D ☐ Change ☒ Addition
2.2 NAME	CRUPI, FRANK
2.3 STREET ADDRESS	255 SUNSET DRIVE NORTH
2.4 CITY, ST, ZIP	ST. PETERSBURG, FL 33710
3.1 TITLE	T/S ☐ Change ☒ Addition
3.2 NAME	LEMON, CHARLES D.
3.3 STREET ADDRESS	205 WEST BEECH STREET
3.4 CITY, ST, ZIP	WESTVILLE, IN 46391
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Debra Crupi Val
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 22 96
Date

813 736-1882
Daytime Phone