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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000075421 (4)

RECYCLE U.S.A., INC.

FILED Jun 02 1998 8:00am Secretary of State



CR2E034 (10/97

Principal Place of Business Mailing Address POST OFFICE BOX 14610 POST OFFICE BOX 14610 **BRADENTON FL 34280 BRADENTON FL 34280** DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 09/27/1995 2. Principal Place of Business 2s. Mailing Address FEI Number Applied For 21 65-0625445 Not Applicable 26 Suite, Apt. #, etc. Suile, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ∏ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MATTHEWS, TERENCE 5190 26TH STREET WEST 82 Street Address (P.O. Box Number is Not Acceptable) SUITE D 83 **BRADENTON FL** 84 City 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. Lam 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 (NOTF Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1 1 TITLE SHEFFIELD, LISA J NAME 1.2 NÁME 7719 24TH AVENUE WEST STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34208** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 21 TITLE NAME HASENFLU, EARL T 2.2 NAME 1125 MALLORCA DRIVE STREET ADDRESS 2.3 STREET ADDRESS BRADENTON FL 34209 CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Addition TITLE 3.1 TITLE Change NAME HASENFLU, JANE 3.2 NAME STREET ADDRESS 1125 MALLORCA DRIVE 3.3 STREET ADDRESS **BRADENTON FL 34209** CITY-ST-2IP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE <mark>700002545237</mark> -06/03/98--01003--022 NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-2IP 4.4 CITY-ST-ZIP ***750.00 Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY+ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST- ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutos. 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 ghanged, or on an attachment with an address.

CICALATURE. DOS OF A PROPERTIES