

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000089283 (2)

1. Corporation Name

AMERICAN TRANSFER & RECYCLING, INC.



Principal Place of Business

2175 M NORTH POWERLINE ROAD  
POMPANO BEACH FL 33069

Mailing Address

2175 M NORTH POWERLINE ROAD  
POMPANO BEACH FL 33069

3. Date Incorporated or Qualified  
11/21/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

21 Suite, Apt. #, etc.

22 City & State

22 City & State

23 Zip

Country

23 Zip

Country

4. FEI Number

65-0625468

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

WESTON, STEVEN J  
2175 M NORTH POWERLINE ROAD  
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

John Pascale

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

2175 M NORTH POWERLINE RD

83

84 City

Pompano Beach

FL

85 Zip Code

33069

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 607.0502, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature required when registering)

3/19/96

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D

WESTON, STEVEN J  
2175 M NORTH POWERLINE RD.  
POMPANO BEACH FL 33069

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT / SEC

☐ Change

☒ Addition

1.2 NAME

John Pascale

1.3 STREET ADDRESS

9671 NW 67 PL

1.4 CITY-ST-ZIP

Parkland FL 33076

2.1 TITLE

V.P. / TREAS.

☐ Change

☒ Addition

2.2 NAME

CRAIG PASCALE

2.3 STREET ADDRESS

3885 PINEWALK DR N, APT 12, APT 206

2.4 CITY-ST-ZIP

MARGATE FL 33063

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/96

974-9797

CR2E034 (12/95)