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FILED

Jan 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000089846 (6)

1. Corporation Name

AMERICAN RECYCLING SYSTEMS, 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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1995

4. FEI Number

65-0625341

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 6911 Wallis Rd.

Suite, Apt. #, etc.

22

City & State

23 West Palm Beach, FL

Zip

24 33413

Country

25

2a. Mailing Address

26 6911 Wallis Rd.

Suite, Apt. #, etc.

27

City & State

28 West Palm Beach, FL

Zip

29 33413

Country

30

9. Name and Address of Current Registered Agent

PASCALE, JOHN
2175 M. NORTH POWERLINE ROAD
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

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

83 6911 Wallis Rd.

84

City West Palm Beach

FL

85 Zip Code

33413

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME PASCALE, JOHN
STREET ADDRESS 9871 NW 67 PLACE
CITY-ST-ZIP PARKLAND FL

TITLE VPT ☐ DELETE

NAME PASCALE, CRAIG
STREET ADDRESS 3385 PINEWALK DRIVE
CITY-ST-ZIP MARGATE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE John Pascale ☒ Change ☐ Addition

12 NAME 3765 TURTLE Run Blvd.

13 STREET ADDRESS APT 1734

14 CITY-ST-ZIP Coral Springs FL 33067

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I 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 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]

[Signature]

CR2E034 (10/97)