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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P9600006412 (6)

PLANET EARTH RECYCLING, INC.

Principal Place of Business

Mailing Address

2005 HAWTHORNE RD. HAWTHORNE FL 32640

2005 HAWTHORNE RD. HAWTHORNE FL 32640

FILED Jun 17 1997 8:00am Secretary of State



| HAWTHORNE FL 32840   | HAWTHORNE FL 32640  |              |   |   |                       |                       |
|--|---------------------|--------------|---|---|-----------------------|-----------------------|
| <b>2</b> #   |                     |              | Date Incorporated or Qualified     3a. Date of Last Report     01/12/1996 |   |                       |                       |
| 2. Principal Place of Business   | 2a. Mailing Address |              |   | 4. FEI Number                                 | Ai                    | oplied For            |
| 21 20001 S. E. HANTHORNE RO 26 P. O. BOX   |                     | 1120         |   | <b>59</b> -33656                              | 19 N                  | ot Applicable         |
| Suite, Apt. #, etc.         Suite, Apt. #, etc.           22         27  |                     |              |   | 5. Certificate of Status Desired              | <b>□</b> \$8.75       | Additional<br>equired |
| City & State City & State  |                     |              |   | 6. Election Campaign Financing                | \$5.00                | May Be                |
| 23 HANTHORNE, FLORIDA 28 HANTHOR Zip Country Zip   |                     | E. FLORIDA   |   | Trust Fund Contribution                       |                       | to Fees               |
| Zip Country  | Zip                 | Country      | · · · · · · · · · · · · · · · · · · ·                                     | 8. This corporation has liability for in      | ntangible tax under s | 199.032               |
| 24 3 & 6 44 25   | 29 326 40-1120 3    | 0            |   | Florida Statutes                              | Yes 🔲 No              |                       |
| 9. Name and Address of Curre   | nt Registered Agent |              |   | 10. Name and Address of New Rec               | gistered Agent        |                       |
| BRASHEAR, BRUCE  |                     | 81           | Name  |   |                       |                       |
| 920 NW 6TH AVE., STE. A  |                     |              | 82 Street Address (P.O. Box Number is Not Acceptable)                     |   |                       |                       |
| GAINESVILLE FL 32601   |                     | 62 Shee      |   | rareas (F.O. Dox Number is Not Neceptars      | 10)                   |                       |
| AMINDAMENT I ARALI   |                     | B3           |   |   |                       |                       |
|  |                     | 0.4          |   |   | Apr   7:n             | 0.4.                  |
|  |                     | 84           | City  |   | FL 85 Zip             | Code                  |
| Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig SIGNATURE  Signature, typed or printed name of registered agent. |                     |              |   | ration's board of directors. I hereby accep   | t the appointment as  | registered            |
|  | ND DIRECTORS        | 13.          |   | ADDITIONS/CHANGES TO OFFICE                   | ERS AND DIRECTOR      | RS IN 12              |
| TITLE D  | ☐ DELETE            | 1.1 TITLE    | /   | PRESIDENT                                     | X Change              | Addition              |
| NAME LEDFORD, CHARLES  |                     | 1.2 NAME     |   | LEDFORD, CHARLES D.                           | . '                   |                       |
| STREET ADDRESS P.O. BOX 1120 N/A   |                     |              | ADDRESS   | 20001 S.E HAWTHOR.                            | NE ROAD               |                       |
| CITY-ST-ZIP HAWTHORNE FL 32640   |                     | 1.4 CITY - S | 37.7IP Z  | LANTHORNE EL 386                              | 40                    |                       |
| TITLE  | DELETE              | 2.1 TITLE    |   | HAWTHORNE, FL 3Ab.                            | Change                | Addilion              |
| NAME   |                     | 2.2 NAME     |   | LED FORD, RAYMOND D.                          |                       | •                     |
| STREET ADDRESS   |                     |              | ADDRESS   | BOODI S.E. HAWTHOR                            | NE ROAD               |                       |
| CITY-ST-ZIP  |                     | 2. 4 CITY-   | \$1.7/P   | Howelle out El 3064                           | La .                  |                       |
| TITLE  | ☐ DELETE            | 3.1 TITLE    | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~                                   | tANTHORNE, FL 3264                            | Change                | Addition              |
| NAME   |                     | 3.2 NAME     |   |   |                       |                       |
| STREET ADDRESS   |                     | 3.3 STREET   | ADDRESS   |   |                       |                       |
| CITY-ST-ZIP  |                     | 3.4 CITY-    | ST-ZIP  |   |                       |                       |
| TITLE  | DELETE 4.1          |              |   |   | Change                | Addition              |
| NAME   |                     | 4. 2 NAME    |   |   |                       |                       |
| STREET ADDRESS   |                     | 4.3 STREET   | ADDRESS   |   |                       |                       |
| CITY-ST-ZIP  |                     | 4.4 C(TY - S | S1 - ZIP  |   |                       |                       |
| TITLE  | DELETE              |              |   |   | Change                | Addition              |
| NAME   |                     | 5.2 NAME     |   |   |                       |                       |
| STREET ADDRESS   |                     | 5.3 STREET   | FADDRESS  |   |                       |                       |
| CITY-ST-ZIP  |                     | 5.4 CITY - 5 |   |   |                       |                       |
| TITLE  | DELETE 6.1 T        |              |   |   | ☐ Change              | Addition              |
| NAME   | _                   | 6.2 NAME     |   |   | ·                     |                       |
| STREET ADORESS   |                     | 6.3 STREET   | LADDRESS  |   |                       |                       |
| CITY-ST-2IP  |                     | 6.4 CITY - 5 |   |   |                       |                       |
| I WILL WILL I  |                     |              |   | ted in Section 119.07(3)(i), Florida Statutes |                       |                       |

I am an officer or director of the corporation or the receiver of trystee entropyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it of langed, or on an attachment with an address.