## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998

SIGNATIBE



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000006412 (6)

PLANET EARTH RECYCLING, INC.

Principal Place of Business Mailing Address 20001 S.E. HAWTHORNE RD. P.O. BOX 1120 HAWTHORNE FL 32640

## **FILED** May 07 1998 8:00am Secretary of State



HAWTHORNE FL 32640 - // 2 0 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3365619 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žιρ Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRASHEAR, BRUCE 920 NW 8TH AVE., STE. A Street Address (P.O. Box Number is Not Acceptable) 82 **GAINESVILLE FL 32601** 83 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETÉ 11 TITLE Addition Change LEDFORD, CHARLES NAME 1.2 NAME 20001 S.E. HAWTHORNE RD. STREET ADDRESS 1.3 STREET ADDRESS HAWTHORNE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition LEDFORD, RAYMOND D. NAME 2.2 NAME 20001 S.E. HAWTHORNE RD. STREET ADDRESS 2.3 STREET ADDRESS HAWTHORNE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3 1 TITLE ☐ Change Addition NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE ☐ Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 are or in attachment with an address.