

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000020857

FILED
Feb 07, 2007
Secretary of State

Entity Name: FLORIDA WOOD RECYCLING, INC.

Current Principal Place of Business:

9651 NW 89 AVE
MEDLEY, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

9651 NW 89TH AVE
MEDLEY, FL 33178 US

New Mailing Address:

FEI Number: 65-0717263 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIMOIN, GERRY
9651 NW 89TH AVE
MEDLEY, FL 33178 US

Name and Address of New Registered Agent:

SCHNEIDER, HARVEY
9651 NW 89TH AVE
MEDLEY, FL 33178 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HARVEY SCHNEIDER 02/07/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GNIWISCH, SAMUEL
Address: 6750 WESTBURY
City-St-Zip: MONTREAL QUE,

Title: PT () Delete
Name: SCHNEIDER, HARVEY
Address: 1380 WEEPING WILLOW WAY
City-St-Zip: HOLLYWOOD, FL 33019

Title: SD () Delete
Name: RIMOIN, GERRY
Address: 9651 NW 89 AVE.
City-St-Zip: MEDLEY, FL 33178

Title: D (X) Delete
Name: GNIWISCH, MAYLR
Address: 4970 CARLTON
City-St-Zip: MONTREAL, QUEBEC,

Title: D (X) Delete
Name: BURNELL, LON
Address: 102 MCNAMARA ROAD
City-St-Zip: NEW HEMPSTEAD, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PTS (X) Change () Addition
Name: SCHNEIDER, HARVEY
Address: 1380 WEEPING WILLOW WAY
City-St-Zip: HOLLYWOOD, FL 33019

Title: D (X) Change () Addition
Name: GNIWISCH, MAYER
Address: 4970 CARLTON
City-St-Zip: MONTREAL, QUEBEC, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARVEY SCHNEIDER P 02/07/2007
Electronic Signature of Signing Officer or Director Date