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FILED

May 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000024207 (8)

1. Corporation Name

SOUTH DADE LANDFILL & RECYCLING CENTER, INC.

Principal Place of Business

12855 SW 136 AVE., #224  
MIAMI FL 33186

Mailing Address

6317 SW 11 ST.  
MIAMI FL 33144-4915

3. Date Incorporated or Qualified

03/13/1996

3a. Date of Last Report

2. Principal Place of Business

21 16150 SW 208 AVE

Suite, Apt. #, etc.

2a. Mailing Address

26 16150 SW 208 AVE

Suite, Apt. #, etc.

4. FEI Number

65-0650924

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

22 City & State

FL

27 City & State

MIAMI

24 Zip

33187

Country

US

29 Zip

33187

Country

US

9. Name and Address of Current Registered Agent

PEREZ, JOSE A  
6317 SW 11 ST.  
MIAMI FL 33144

10. Name and Address of New Registered Agent

81 Name

JORGE F ESPINOSA

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

16150 SW 208 AVE

83

84 City

MIAMI

FL

85 Zip Code

33187

11. Pursuant to the provisions of Sections 607.012 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

JORGE F ESPINOSA

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

(NOTE: Registered Agent signature required when reinstating)

4/28/97

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
ESPINOSA, JORGE  
16150 SW 208 ST.  
MIAMI FL 33187

☐ DELETE

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVT  
RIVERO, ARMANDO  
9031 SW 21 ST.  
MIAMI FL 33185

☒ DELETE

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
EVORA, ARMANDO  
8800 SW 94 CT.  
MIAMI FL 33173

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐

Change

☐

Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐

Change

☐

Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐

Change

☐

Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐

Change

☐

Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐

Change

☐

Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐

Change

☐

Addition

14. I do 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 registered 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

4/28/97

CR2E034 (9/96)