## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000034704 (2)

SOUTH DADE RECYCLING CENTER

000111	DADE HEOTOEING OEI	11611								
Principal Place	of Business	Mailing Address 7809 NORTHWEST 57TH STREET MIAMI FL 33166								
7809 NORTHW MIAMI FL 3316	EST 57TH STREET 6				DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified 04/18/1996	3a.	Date of Last Report		
2. Principal Place of Business 21		2a. Mailing Add	2a. Mailing Address 26			4. FEI Number 66-067282	3	Applied For Not Applicable		
Suite, Apt. 6	i, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	ertificate of Status Desired S8.75 Additional Fee Required				
City & State		City & State	City & State			Election Campaign Financing     Trust Fund Contribution				
Zip <b>24</b>	Country 25	Zip 29	30 Co	Country		8. This corporation owes or has pa Personal Properly Tax due June		current year Intangible		
	g. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistere	d Agent		
ANDREU, MAXIMILLIANO J 230 SOUTHWEST 15TH STREET FT. LAUDERDALE FL 33315					Name					
					Street Add	ress (P.O. Box Number is Not Acceptab	le)			
				83						

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.

**B4** City

agoist. La	in tantiliar with, and accept the obligations of	36011011 607.0303, 1101	ida Sialdies.				
SIGNATURE	Signature, lyped or printed name of registered agent and title if	applicable. (NOTE:	Registered Agent signature requir	ed when reinstation)	DATE		}
12.	OFFICERS AND DIRECT	13.	ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS	S IN 12	
TITLE	PD	DELETE	1.1 TITLE			Change	Addition
NAME	ANDREU, MAXIMILIANO J		1.2 NAME	4000	102258	554-	7
STREET ADDRESS	230 SOUTHWEST 15TH STREET		1.3 STREET ADDRESS		08/05/970	10950	111
CITY-ST-ZIP	FT. LAUDERDALE FL 33315		1.4 CHIY-SI-ZIP	: 1	₩ <b>*</b> *165.00	****16	5.00
TITLE	VD	DELETE	2.1 TITLE			Change	Addition
NAME	AMARO, GRACIELA M		2.2 NAME	1			}
STREET ADDRESS	5859 SOUTHWEST 24TH STREET		2.3 STREET ADDRESS		.56		
CITY-ST-ZIP	MIAMI FL 33155		2.4 CITY-ST-ZIP	ĺ			Í
TITLE	STD	DELETE	3.1 TITLE			Change	Addition
NAME	VALDES, RITA M		3.2 NAME	1			
STREET ADDRESS	1055 WEST 30TH STREET		3.3 STREET ADDRESS				
CITY-ST-	HIALEAH FL 33012		3 4. CITY-ST-ZIP	•			1
TITLE		DELETE	4.1 TITLE	1		Change	Addition
NAME			4.2 NAME	į.			
STREET ADDRESS			4.3 STREET ADDRESS	:			
CITY+ST-ZIP			4.4 CI1Y-ST-ZIP				ĺ
TITLE		DELETE	5.1 TITLE	1		Change	Addition
NAME			5.2 NAME	:			
STREET ADDRESS			5.3 STREET ADDRESS				i
CITY-ST-ZIP	 	/ \	5.4 CITY-ST-ZIP				
TITLE	1	DELETE	6.1 TITLE	1		Change	Addition
NAME	1 /	,	6.2 NAME			/(	<i>V</i>       <i>V</i>
STREET ADDRESS		1, 1	6.3 STREET ADDRESS			<i>     </i>	74 / I
DITY-ST-ZIP	I (	1(.)	6.4 CITY-S1-ZIP	!		$( \cup $	

14. I do hereby certify that the information supplied with this filling toes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify hat the information indicated on this annual report or supplied enter a supplied that the same legal effect as if made under oath; that I am an officer or director of the corporation and that my name appears in Block 12 or Block 13 if change in print in the information that it 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 and that my name appears in Block 12 or Block 13 if change in the information and that my name appears in Block 12 or Block 13 if change in the information and the information supplied that the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify hat the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify hat the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify hat the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify hat the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify hat the information indicated in Section 119.07(3)(ii). Florida Statutes in Section 119.07(3)(iii). Florid

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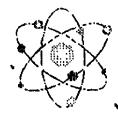
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SEGNUTARO DE STATE TALLAHASSEE, FLORIDA

CR2E034 (4/97)

Zip Code

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## South Dade Recycling Center

7809 Northwest 57th Street Minmi, Liorida 33166 (305) 470-4501 Ax (305) 470-9749

July 21, 1997

Florida Department of State Divisions of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: South Dade Recycling Center

Dear Sir/Madam:

We have received a 2nd notice from your office pertaining to the filing fee for 1997. We never received the first notice. I have been advised by your office to advise you of this, complete the form and mail you a check in the amount of \$165.00.

If you have any questions please contact our office.

HAMMA

SECRÈTARY/TREASURER

RMV