Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90049 013 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P97000015405**

1. Corporation Name

C.O.D. RECYCLING SERVICES, INC.

Principal Place	of Business	Mailing Address		•		£ 18841887 158 JUNIO (Bâte Anies Anies Anies	11981 Aliti Alak	19181 \$111 1981
2930 SAN JOSE AVENUE COOPER CITY FL 33026		2930 SAN JOSE AVENUE COOPER CITY FL 33026		DO NOT WRITE IN THIS	SPACE			
The state of the s						3. Date Incorporated or Qualifed 02/18/1997		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				65-0731000	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 / Fee Re	1
City & State	e . ,,,,,	City & State		6. Election Campaign Financing	\$5.00			
23	· · · · · · · · · · · · · · · · · · ·	28		Trust Fund Contribution	Added	o Fees		
Zip	Country	Zip	— Co∟	untry		8. This corporation owes the current year Int		
24	25		30			Personal Property Tax.	Yes	□No
ļ	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered	Agent	
AME	RILAWYER CHARTERED			61	Name			
				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
343 ALMERIA AVENUE CORAL GABLES FL 33134				83				
4 7 315	·			100				
(A) 1 (A) 1 (A) 1 (A)				84	City	FL	85 Zip 6	
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 thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name or registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)								
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE :	PSTD .	☐ DELETE	1.1 Π	TTLE			☐ Change	☐ Addition
NAME	RICHMAN, RANDALL L		12M				□ change	
STREET ADDRESS	2930 SAN JOSE AVENUE	and the second s	1.2 N	IAME			□ Cilailge	
CITY-ST-ZIP		•			ADDRESS		□ citailge	
700.5	COOPER CITY FL 33026		1.3 S					
TITLE	COOPER CITY FL 33026	☐ DELETE	1.3 S	STREET A			Change	Addition
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	COOPER CITY FL 33026	☐ DELETE	1.3 S 1.4 C 2.1 TI 2.2 N	STREET A CITY-ST- TITLE NAME				Addition
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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, or on an attachment with an address, with all other like empowered C.B.O.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

RANDEN BRICHMAN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

Addition