

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P-97-000052088

1. Entity Name

EASTERN RECYCLING, INC.

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90076 039 ***150.00

Principal Place of Business

2075 N POWERLINE ROAD
POMPANO BEACH FL 33069
US

Mailing Address

2075 N POWERLINE ROAD
POMPANO BEACH FL 33069
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0764343

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
P MARZANO, PATRICK F 2075 N POWERLINE ROAD POMPANO BEACH FL 33069	<input checked="" type="checkbox"/>	Please see attached	<input checked="" type="checkbox"/>
S GREENE, CHARLES D 2075 N POWERLINE ROAD POMPANO BEACH FL 33069	<input checked="" type="checkbox"/>	Please see attached	<input checked="" type="checkbox"/>
VP ROBERTS, THOMAS R 2075 N POWERLINE ROAD POMPANO BEACH FL 33069	<input type="checkbox"/>		<input type="checkbox"/>
T MARZANO, MICHAEL C 2075 N POWERLINE ROAD POMPANO BEACH FL 33069	<input type="checkbox"/>		<input type="checkbox"/>
	<input checked="" type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

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 report or supplementary 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 effect this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-974-3800