

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90048 030 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 798000000419

1. Corporation Name
RAPID ROLL-OFF AND RECYCLING, INC.

Principal Place of Business Mailing Address
1410 S. POWERLINE ROAD
DEERFIELD BEACH, FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/97

4. FEI Number

65-0805850

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

-Trust Fund Contribution

-Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 1410 S. POWERLINE ROAD

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

27 City & State

DEERFIELD BEACH, FL

28

24 Zip

25 Country

29 Zip

30 Country

33442

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELLEN PEPTONE
22247 ALYSSUM WAY
BOCA RATON, FL 33433

81 Name

MORGAN LANCE PEPTONE

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

1524 S.E. 12TH ST

83

84 City

DEERFIELD BEACH

FL

85 Zip Code

33441

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.

SIGNATURE: MORGAN LANCE PEPTONE

5/11/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE
NAME JORDAN FORD
STREET ADDRESS 39 NW 44TH TER
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME MORGAN PEPTONE
1.3 STREET ADDRESS 1524 S.E. 12TH ST
1.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME VIT
2.3 STREET ADDRESS PAUL CRAGE
2.4 CITY-ST-ZIP 3671 NW 4TH AVE
BOCA RATON, FL 33431

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: PAUL CRAGE

5/11/99 (954)427-4779

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)