PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000074216

1. Corporation Name

LEMBO ROCK & RECYCLING, INC.

May 10, 1999 8:00 am Secretary of State

05-10-1999 90156 005 ***158.75



				_				
Principal Place	e of Business	Mailing Address				, 10011001 110 2011 2011 2011 2011 2011		
700 N.W. 21ST TERRACE 700 N.W. 21ST TERRACE FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33311						DO NOT WRITE IN THI	S SPACE	
						3. Date Incorporated or Qualifed 08/25/1998		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Δ	Applied For
21		26				65-0858889		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional Required ———
City & State	e .	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be i to Fees
Zip	Country	Zip	Cour	itry		8. This corporation owes the current year la		
24	25	29 3	30	_		Personal Property Tax.	Yes	⊉ 1√0
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered	1 Agent	
	20 10111			81 Na	me			
LEMBO, JOHN				82 Str	et Addre	t Address (P.O. Box Number is Not Acceptable)		
	N.W. 21ST TERRACE							
FOR	T LAUDERDALE FL 33311			83				
			}	84 City	,		85 Zip	Code
						FI		
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with, and accept the obligation.	of Florida, Such change was auf	horized	hy the c	ed corpo orporation	pration submits this statement for the purpose on's board of directors. I hereby accept the appears	of changing it pintment as r	egistered egistered
SIGNATURE								
42	Signature, typed or printed name of registered age		13.	Agent signal	ure required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
12.	OFFICERS AN	DELETE 1.17			10	es, den t	Change	
NAME			1.2 NA		7	Tohn Lembo		_
STREET ADDRESS				::= REET ADORI	-ss 3	Dai Ne 460 Street		
i				Y-ST-ZIP	E	t. Landardade FL		
CITY-ST-ZIP TITLE		☐ DELETE	2.1 TITI	_	- 1	A mand Car Dall a	Change	e Addition
NAME			2.2 NAI	ИE				
STREET ADDRESS				"" REET ADDRI	ESS			
CITY-ST-ZIP			1	Y-ST-ZIP			_	
TITLE		☐ DELETE	3.1 TIT				[] Change	e Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET ADDR	ESS			
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TIT				Change	e 🔲 Addition
NAME			4. 2 NA	ME				
STREET ADDRESS				REET ADOR	ESS			
CITY-ST-ZIP				Y-\$T-ZIP				
TITLE		☐ DELETE	5 1 TIT	_			Change	e 🔲 Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 STI	REET ADDR	ESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	6.1 TIT	LE			Change	e Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 STF	REET ADDR	ESS			

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 or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #