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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000080038 1. Corporation Name

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90070 022 ***150.00

BERRY'S	S RECYCLING, INC.										
Principal Place	e of Business	Mailing Address					eri veik eik	i Alleir Galdt (8	1151 48 711	- 41 W W 11	PT (E() (66)
1209 LEON LAN	iE	1209 LEON LANE							1		
HOLLY HILL FL 32117 HOLLY HILL FL 32117						DO NOT WRITE IN THIS SPACE					
					}	3. Date Incorporated or		L 11113 4	J. AUE		
		,				09/11/1998					
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	- 1			Appl	ied For
21 1330	1 Center Street	26				59-353-	340	<u> </u>		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status D					ditional
22		27				3. 001110010 01 011110				e Req	
City & Stat	11 () 1	City & State				Election Campaign F Trust Fund Contribut	-			00 M ded to	lay Be Fees
Zip	Country	Zip	Country	,		8. This corporation owe		nt year Inta			
24 321	17 25 Volusia	29 30				Personal Property Ta			Ŭ Yes		⊒No
241 001	9. Name and Address of Current	_ 				10. Name and Address	of New R	egistered A	gent		
		·	81	Name							
	RY, SHERYL A		82	Street A	Addres	s (P.O. Box Number is No	ot Acceptal	ble)			
	LEON LANE			Cubbir							
HOL	LY HILL FL 32117		83								Ī
			84	City				FL	85	Zip Co	de
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, t	he above	e-named o	corpora	ation submits this stateme	ent for the period	ourpose of o	changin tment a	g its re	egistered stered
office or r	registered agent, or both, in the State o m familiar with, and accept the obligation	f Florida. Such change was autho ons of, Section 607.0505, Florida	Statutes	the corpo	oration:	's board or directors. I her	ent for the peby accep	purpose of c	tment a	g its regi	egistered stered
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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.

SIGNATURE:

Wheny SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR