

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 11 1997 8:00am
Secretary of State

DOCUMENT # S22888 (9)

1. Corporation Name:

DADE RECYCLING SERVICES, INC.



Principal Place of Business

15490 NW 6 ST
#2
MIAMI FL 33016
US

Mailing Address

154900 NW 97 AVE
#2
MIAMI FL 33016
US

3. Date Incorporated or Qualified

01/07/1991

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 15490 NW 97 AVE

2a. Mailing Address

26 Suite, Apt. #, etc.

22

City & State

23 Miami FL

24 33016

Country

25 USA

27 City & State

28

Zip

29

Country

30

4. FEI Number

65-0252349

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

GONZALEZ, ANTONIO E
8070 NW 162 LANE
SUITE 302
MIAMI FL 33046

10. Name and Address of New Registered Agent

81 Name

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

83

84

City

MIAMI

FL

85 Zip Code

33016

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

(Signature of person who is the registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

3-7-97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME MONTEAGUDO, MARGARITA
STREET ADDRESS 13855 SW 34 ST
CITY- ST- ZIP MIAMI FL

TITLE ☐ DELETE

P
NAME MONTEAGUDO, JESUS
STREET ADDRESS 15490 NW 97 AVE.
CITY- ST- ZIP MIAMI FL

TITLE ☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-97 (305) 826-0707

Date

Daytime Phone #

0616035

CR2E034 (9/96)