FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PRINT

CORPORATION ANNUAL REPORT

1996

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

APPROVED AND FILED

1996 MAY -1 PM 4:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V14182** **(2)**

1. Corporation Name

MODERN RECYCLING, INC., OF FLORIDA

Principal Place of Business	Mailing Address
3390 LANDFILL ROAD NAPLES FL 33964 US	PO BOX 209 6100 ESTERO BOULEVARD MODEL CITY NY 14107 US

3. Date Incorporated or Qualified: **02/14/1992**

3a. Date of Last Report: **02/07/1995**

4. FEI Number: **65-0315348** ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 24278 Production Circle	26 24278 Production Cr
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Bonita Springs, FL	28 City & State: Bonita Springs, FL
24 Zip: 33923 25 Country: USA	29 Zip: 33923 30 Country: USA

9. Name and Address of Current Registered Agent

COTTER, RICHARD T., P.A.
6100 ESTERO BLVD.
FORT MYERS BEACH FL 33931

10. Name and Address of New Registered Agent

81 Name: Kushner, Steven P.
82 Street Address (P.O. Box Number is Not Acceptable): 1375 Jackson Street
83 Tidewater Building Suite #2
84 City: Fort Myers FL 85 Zip Code: 33901

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: Steven P. Kushner (Signature of person authorized to change registered office or registered agent) DATE: 4/16/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WASHUTA, STEVE 4746 MODEL CITY RD., MODEL CITY NY	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WASHUTA, LORIE 4746 MODEL CITY RD. MODEL CITY NY 14107	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	S,D	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WASHUTA, RICHARD 4746 MODEL CITY RD. MODEL CITY NY 14107	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	VP,D	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WASHUTA, SONIA 4746 MODEL CITY RD. MODEL CITY NY 14107	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	VP,D	☐ Change ☐ Addition 600001324976 -05/16/96--01089--012 ****200.00 ****200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition 5CC 5-1-96

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 4-19-96 (Date)