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

29

9. Name and Address of Current Registered Agent

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

PROFIT CORPORATION ANNUAL REPORT

1997

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V33989

25

16519 NW 27TH AVENUE

WIBLE, ROY S.

MIAMI FL 33054

SIGNATURE:

FLORIDA ONE RECYCLING CORPORATION

Principal Place of Business Mailing Address 2000 NE 21 TERRACE 2000 NE 21 TERRACE FT. LAUDERDALE FL 33306-1218 FT. LAUDERDALE FL 33306 HS 3. Date Incorporated or Qualified 3a. Date of Last Report 05/04/1992 04/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0330709 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Ζιρ Country Zip Country

30

81

83 84 City

Name

FILED Apr 08 1997 8:00am Secretary of State



This corporation has liability for intengible tax under s. 199,032,

10. Name and Address of New Registered Agent

Florida Statutes

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

Yes 🔲 No

Applied For

Fee Required

Added to Fees

Zip Code

Not Applicable

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Addition DELETE Change TITLE 11 TITLE Jurgle, John NAME 1.2 NAME 2800 NE 21 TERRACE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 City - St - ZiP Addition ■ DELETE Change TITLE 2.1 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CHY-ST-ZIP Change Addition DELETE 3.1 TITLE TOLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - \$1 - 7IP DELETE Change Addition TITLE 5.1 TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 City-ST-ZIP DELETE Change ☐ Addition 6.1 TITLE THLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-\$1-2IP 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