## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

**DOCUMENT #** V35048 (0)

## AUTOMOTIVE INDUSTRIAL RECYCLERS HOLDING COMPANY

Principal Place	e of Business	Mairing Address									
ATTN: BARE 3003 BUTTE OAK BROOK US		attn: Barbara 3003 Butterfie Oak Brook IL Us	LD RD.			Date Incorporated or Qualified     05/06/1992		te of Last Report 0 <b>4/20/1995</b>			
2. Principal Place of Business		2a. Maling Address				4. FEI Number		Applied For			
1		26				59-3121042		Not Applicable			
Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required			
- C)   D C) - A		City & State				6, Election Campaign Financing		\$5.00 May Be			
City & Stat	е	28				Trust Fund Contribution		Added to Fees			
Zip	Country 25	Zip (29)	30 Co	untry		8. This corporation has liability for Florida Statutes	intangible No	tax under s. 199.032,			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
<u> </u>	g. Hamo and Mande			81							
CT CORPORATION SYSTEM 1200 S. PINE ISL RD.				Street Address (P.O. Box Number is Not Acceptable)							
PLANTATION FL 33324				83							
				84	City		F	85 Zip Code			
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida	Statutes, the ab	ove r	amed corpo	oration submits this statement for the pu	rpose of c	hanging its registered office			

or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of direct familiar with, and accept the obligations of. Section 607.0505, Florida Statutes

12.	OFFICERS AND DIF	RECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD	☐ DELETE		hector	☐ Change	M Addition		
IAME 3MAI	O'CONNOR, JAMES		12 NAME	lichael fl. Amold	4			
TREET ADDRESS	3003 BUTTERFIELD RD		13 STREET ADDRESS	lichael A.Amold 3003 Butterfield 2001 10K Brook, II 6005	a			
ITY - ST - ZIP	OAK BROOK IL		14 CITY - ST - ZIP	ak Brook, Il 605	<u> </u>			
ITLE	VD	☐ DELETE	2 1 TITLE		Change	☐ Addition		
AME	FERGUSON, STEVEN D.		2.2 NAME					
TREET ADDRESS	3003 BUTTERFIELD RD.		2.3 STREET ADDRESS					
IITY-ST-ZIP	OAK BROOK IL		2.4 CITY - ST - ZiP					
ITLE	SD	X DELETE	3 1 TITLE		☐ Change	Addition Addition		
IAME	RAY, JOHN J. III		3.2 NAME					
TREET ADDRESS	3003 BUTTERFIELD RD.		3.3 STREET ADDRESS					
CITY - S1 - ZIP	OAK BROOK IL		3.4 CITY - ST - ZIF					
ITLE	7	☐ DELETE	4 1 T:TLE		☐ Change	Addition		
IAME	FERGUSON, STEVEN D.		4.2 NAME					
TREET ADDRESS	3003 BUTTERFIELD RD.		4.3 STIFLET ADDRESS					
aty-S1-ZIP	OAK BROOK IL		4.4 CITY - ST - 7IP					
ITLE	AS	☐ DELETE	5 1 THLE		Change	o tibbA 🔲		
iame :	BIER, BARBARA L.		5.2 NAME					
TREET ADDRESS	3003 BUTTERFIELD RD.		5.3 STREET ADDRESS					
CITY - S1 - ZIP	OAK BROOK IL		5.4 CITY - S1 - 7IP		~			
ITLE		DELETE	6.1 TITLE 4	0000017	<b>/ 4 U (5 W</b> ) 98	Additio		
IAME			62 NAME ,	-04/09/96010	J92- <b>-</b> U49			
STREET ADDRESS			6 3 STREET ADDRESS	***200 <b>.</b> 00				
CITY \$1 710			64 C TY - ST - ZIP					

14. I do hereby certify that the information supplied with this fining 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 certify 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 BALLER BALLER