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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

**CORAL SPRINGS FL 33065** 

Suite, Apt. # loto

City & State

2. Principal Place of Business

7018 NW 40 CT

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V58899** 

(8)

CORAL SPRINGS FL 33065-2212

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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7018 NW 40 CT

ADVANCED RECYCLING VENTURE, INC.

Secreta	ary (	of S	tate
3. Date Incorporated or Qualified 08/20/1992	3a. Date of Last Report 06/07/1996		
4. FEI Number	-L		lied For
65-0352355		Not .	Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required	
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			
10. Name and Address of New Reg	istered Ag	ent	
s (P.O. Box Number is Not Acceptab	le)		
	FL	85 Zip Co	ode
ation submits this statement for the purpose of changing its registered i's board of directors. I hereby accept the appointment as registered			
when re-instating)	DATE		
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
		Change	☐ Addition ≥

**FILED** 

Jan 21 1997 8:00am

Country Country Ζıρ Zιρ 30 24 25 29 9. Name and Address of Current Registered Agent 11 81 Name UHER. RONALD L. 7018 NW 40 CT Street Address **CORAL SPRINGS FL 33065** 83 84 City 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporati office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Signature Typed or print diname of registered agent and file if applicable (NOTE: Registered Agent signature required wh 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 11 TITLE UHER. RONALD L. NAME 12 NAME 7018 NW 40TH CT STREET ADDRESS 13 STREET ADDRESS **CORAL SPRINGS FL** 14 CITY - ST-ZIP CITY - ST - ZIP DELETE 21 TITLE Change Addition TITLE GALLO, VINCENT J. NAME 2.2 NAME 14842 BONNY BRIDGE DRIVE 23 STREET ADDRESS STREET ADDRESS ORLANDO FL 2 4 CITY-ST-ZIP CITY - \$1 - 74P DELETE Change Addition TITLE 3 1 TITLE NAME 3.2 NAME **3.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 34. CITY-ST-ZIP DELETE Change TITLE 41 TITLE Addition 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP \_\_\_ DELETE Change Addition TITLE 5.1 TITLE NAMÉ 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-S1-ZIP 54 CITY - ST-ZIP DELETE Change Addition TIT.E 61 THLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-7IP 64 CITY - ST - ZIP

14. I do hereby cert fy 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 changes, or on an attachment with an address.

SIGNATURE:

SMALL KONAL SAND TYPED OF PRINTED NAME OF SIGNING OFFICER

KONALA L. LHER

1-10-97

954-946-7604