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1995 MAY -1 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **F93000000089 (3)**

1. Corporation Name

STEEL CITY ENVIRONMENTAL SERVICES, INC.

100001491701
-05/17/95--01138--005
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE.

Principal Place of Business

Mailing Address

1125 CAMP HOLLOW ROAD
WEST MIFFLIN PA 15122

1125 CAMP HOLLOW ROAD
WEST MIFFLIN PA 15122

3. Date Incorporated or Qualified

3a. Date of Last Report

12/30/1992

05/01/1994

4. FEI Number

25-1629624

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

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEARS, GREGORY L
3800 N. POWERRLINE ROAD
POMPANO BEACH FL 33073

81 Name

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

83

84 City

FL

85

Zip Code

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 registering

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	CONNELLY, JOSEPH M	1125 CAMP HOLLOW ROAD	WEST MIFFLIN PA 15122
STD	MAHOKEY, DAVID W	1165 CAMP HOLLOW ROAD	WEST MIFFLIN PA 15122
VPD	BOVE, ALBERT C	1165 CAMP HOLLOW ROAD	WEST MIFFLIN PA 15122
VPD	ANTHONY, SAMUEL R	1165 CAMP HOLLOW ROAD	WEST MIFFLIN PA 15122
D	ANTHONY, RAY G	1165 CAMP HOLLOW ROAD	WEST MIFFLIN PA 15122

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	Change	Addition
Chairman of the Board (DC)	Raymond G. Anthony	1165 Camp Hollow Road	West Mifflin, Pa. 15122	<input checked="" type="checkbox"/>	<input type="checkbox"/>
President (PD)	Robert T. McCormick	1125 Camp Hollow Road	West Mifflin, Pa. 15122	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STD	David W. Mahokey	1165 Camp Hollow Road	West Mifflin, Pa. 15122	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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

5/2/95

Register #12222