SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $223 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT **1995**

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

FILED
95 JUL 28 PM 1:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # F94000001493 (5)

1. Corporation Name

RELIANCE ENVIRONMENTAL MANAGEMENT, INC.

Principal Place of Business	Mailing Address
6840 GEISER ROAD HOLLAND OH 43528	6840 GEISER ROAD HOLLAND OH 43528

3. Date Incorporated or Qualified: 03/24/1994
3a. Date of Last Report:

4. FEI Number: 34-1673161 ☐ 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
22 Suite, Apt #, etc.	27 Suite, Apt #, etc.
23 City & State	28 City & State
24 Zip — 25 Country	29 Zip — 30 Country

9. Name and Address of Current Registered Agent

HALE, DOUG
681 DENTON BLVD.
FORT WALTON BEACH FL 32547

10. Name and Address of New Registered Agent

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 reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	1.1 TITLE	☐ Change ☐ Addition
NAME	BURZYNSKI, JAY J	1.2 NAME	
STREET ADDRESS	2348 HEMPSTEAD	1.3 STREET ADDRESS	
CITY ST ZIP	TOLEDO OH 43606	1.4 CITY ST ZIP	
TITLE	TD	2.1 TITLE	☐ Change ☐ Addition
NAME	BURZYNSKI, LAURA L	2.2 NAME	
STREET ADDRESS	2348 HEMPSTEAD	2.3 STREET ADDRESS	
CITY ST ZIP	TOLEDO OH 43606	2.4 CITY ST ZIP	
TITLE	~~S~~	3.1 TITLE	☐ Change ☐ Addition
NAME	~~GROSS, ALDEN E III~~	3.2 NAME	
STREET ADDRESS	~~405 MADISON AVENUE, SUITE 1575~~	3.3 STREET ADDRESS	
CITY ST ZIP	~~TOLEDO OH 43604~~	3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

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] 7/19/95 419-867-1994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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