

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P32999 (5)**

1. Corporation Name

P.T. & L. ENVIRONMENTAL CONSULTANTS, INC.



Principal Place of Business Mailing Address
1 KALISA WAY STE. 106 PARAMUS NJ 07652

3. Date Incorporated or Qualified 02/28/1991	3a. Date of Last Report 01/27/1995
4. FEI Number 22-2998393	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt #, etc	26 Suite, Apt #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent
**SCHNEIDER, MARK
201 S BUMBY ST
S-B
ORLANDO FL 32803**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 *Mark E. Schneider*, **MARK E. SCHNEIDER, Vice President - Southeast** **6/20/96**
Signature of principal place of business of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> DELETE
NAME	FRIDMAN, SIMON	
STREET ADDRESS	15-08 LANDZETTEL WAY	
CITY - ST - ZIP	FAIR LAWN NJ	
TITLE	P	<input type="checkbox"/> DELETE
NAME	LAGANELLA, NICHOLAS A.	
STREET ADDRESS	4 VINE ST.	
CITY - ST - ZIP	WALDWICK NJ	
TITLE	S	<input type="checkbox"/> DELETE
NAME	LAGANELLA, NICHOLAS A.	
STREET ADDRESS	700 NELSON RD	
CITY - ST - ZIP	MONROE NY	
TITLE	T	<input type="checkbox"/> DELETE
NAME	RUMSEY, MARY ELLEN	
STREET ADDRESS	700 NELSON RD R.D. 4	
CITY - ST - ZIP	MONROE NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	SEC. MARY ELLEN RUMSEY
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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, the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed thereon as an attachment with an address.

SIGNATURE: *Nicholas Laganello*
NICHOLAS LAGANELLO, II **6/7/96 201-262-4141**
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E034 (3/96)