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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 17 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 809091

(2)

## **DRAVO CORPORATION**

CITY-ST-AP

Principal Place ONE OLIVER I ATTN: TAX DE PITTSBURGH	PLAZA EPT.	Mailing Address  ONE OLIVER PLAZA ATTN: TAX DEPT, PITTSBURGH PA 15222-2604											
						:	3. Date Incorporated or Qualified 10/18/1952 3a. Date of Last Report 03/29/1996						
2. Principal Pi	ace of Business	2a. Mailing Address						4. FEI Number				pplied For	
21		26					l	25-0447860 Not Applicable					
Suite, Apt	#, etc	Suite, Apt. #, etc.						5. Certificate of Status Desired See Required \$8.75 Additional Fee Required					
22	***************************************	27											
City & State		City & State						6. Election Campaign Financing \$5.00 May Be					
23]			Zip Country					<u> </u>	Trust Fund Contribution				
Zip	· · · · · · · · · · · · · · · · · · ·						urith E		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  No				
24	4 25 9. Name and Address of Current			29 30 Begistered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent					
CT			. ricgiatorou	- Agent		81	Name		0. 1101110 dilu A		- Sieroi ec	, v.Ao.iii	<del></del>
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD									······································	·····			
	INTATION FL 333				82	Street	et Address (P.O. Box Number is Not Acceptable)						
, 5	11/////////////////////////////////////	/E-T				В3							
	and the second				•					***************************************			
	: :					84	City				FI	85 Zip	Code
11. Pursuant to office or reagent. Lar	to the provisions of egistered agent, or m familiar with, and	Sections 607.0502 both, in the State of accept the obliga	eand 607.15 of Florida. Su tions of, Sec	08, Florida Statu ich change was tion 607.0505, F	ites, the a authorize forida Stat	d by utes	named the corp	l corporal poration's	tion submits this s board of direc	statement for the lors. I hereby acce	purpose optithe ap	of changing i pointment as	ts registered registered
Signature, typied or printed name of registered agent and title if applicable (NOTE							gistered Agent argnature required when reinstating) DAYE						
12.		OFFICERS AND	DIRECTOR		13.			<del>,</del>	ADDITIONS/C	HANGES TO OFFI	CERS AN		
TITLE	LADD, ERNES	7 6		L DELETE	1.1 11		•		•			Change	Addition
NAME OTOTET ADDOLOG	ONE OLIVER F				1.2 N		1000000						
STREET ADORESS	PITTSBURGH,						ADDRESS						
CITY-ST-ZIP TITLE	V V	17 00000		☐ DELETE	1.4 CI 2.1 TI		1-719	<del></del>	<del></del>			Change	Addition
NAME	MAJOR, JOHN	I P		בן טנננונ	2.1 II							L. Change	L''' WOOMION
STREET ADORESS	ONE OLIVER F						ADDOLES						
	PITTSBURGH,				1		ADDRESS						
CHY-ST-ZIF TITLE	PD	17 0000		DELETE	2.40 3.1 TI		912-718	<del> </del>				Change	Addition
NAME	GILBERT, CAR	t. A.		hand while the	3.1 N			] ,				- January	radinort
STREET ADDRESS	3600 ONE OLI				1		ADDRESS						
G(1Y-\$1-Z)P	PITTSBURGH,				1								
TITLE TITLE	VS VS			DELETE	3.4. U		ST - ZIP	<del> </del>	<del></del>	······································		Change	Addition
NAME	PUHALA, JAMI	ES J.			4.2 N							3130130	
STREET ADORESS	ONE OLIVER F						ADDRESS						
CITY-ST-200	PITTSBURGH,						1 - ZIP						
HILE	AS			DELETE	5.1 TI		, <u>e</u> n	AS				<b>X</b> Change	Addition
NAME	KNIZNER, RICI	HARD M			5.2 N			KN12	ENER, RICH	HARD M.		<del></del>	
STREET ADORESS	P.O. BOX 206						ADDRESS	3600	ONE OLIV	ER PLAZA			
CITY-SI-20F	MOBILE AL	***			5.4 C					PA 15222			
MILE	D			DELETE	6.1 TI	******						Change	Addition
NAME	ROTH, WILLIA	M G.			6.2 N								
STREET ADDRESS	ONE OLIVER F						ADDRESS						
CITY-ST-AP	PITTSBURGH.						1.7IP						

14. I do hereby certify 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 changed, or on an attachment with an address

6.4 CITY - S1 - ZIP

RICHARD M. KNIZNER 2-4-97 (412) 566-3000 SIGNATURE