

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

FILED

Apr 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 851540 (5)
1. Corporation Name
OHM REMEDIATION SERVICES CORP.



Principal Place of Business 16406 US ROUTE 224 EAST PO BOX 551 FINDLAY OH 45839	Mailing Address 16406 US ROUTE 224 EAST PO BOX 551 FINDLAY OH 45839-0551
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3. Date Incorporated or Qualified 01/08/1982	3a. Date of Last Report 02/09/1996
4. FEI Number 34-1275607	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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRK, JAMES L	1.2 NAME	
STREET ADDRESS	7130 CR 254	1.3 STREET ADDRESS	
CITY-ST-ZIP	FINDLAY OH	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRK, JOSEPH R	2.2 NAME	
STREET ADDRESS	7801 TR 215	2.3 STREET ADDRESS	
CITY-ST-ZIP	FINDLAY OH	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAY, JOHN J. III <i>Steven E. Harbour</i>	3.2 NAME	
STREET ADDRESS	16406 US RT 224 EAST	3.3 STREET ADDRESS	
CITY-ST-ZIP	FINDLAY OH	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSEL, KRIS E	4.2 NAME	
STREET ADDRESS	16406 US RT 224 EAST	4.3 STREET ADDRESS	
CITY-ST-ZIP	FINDLAY OH	4.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEALL, PAMELA K. M.	5.2 NAME	
STREET ADDRESS	812 BITTERBRUSH LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	FINDLAY OH	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: *[Signature]* DATE: 4/9/97 DAY: 423-3326

CR2E034 (9/96)