PROFIT CORPORATION ANNUAL REPORT 1999



Mailing Address

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F94000003529

Principal Place of Business

RT ENVIRONMENTAL SERVICES, INC.

215 W. CHURCH ROAD KING OF PRUSSIA PA 19406		215 W. CHURCH ROAD KING OF PRUSSIA PA 19406				DO NOT WRITE IN	THIS:	SPAC	E		
							3. Date Incorporated or Qualifed				
2 Principal	Plane of Pusinger	2a. Mailing Address					07/06/1994 4. FEI Number Applied For				
2. Principal Place of Business			├ - ¬					Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				23-2534548	\$8.75 Additional			
			June, Apr. #, etc.				5. Certificate of Status Desired				equired
City & State			City & State				6 Floation Compaign Financian				
23							- 6. Election Campaign Financing —	Added to Fees			
Zip Country			Zip Country				This corporation owes the current year.	ar Inta			101000
24 25		29	¬ ' — '				Personal Property Tax.	ai ilita	Ye		□No
24;	9. Name and Address of Curre			 			10. Name and Address of New Registe	ered A			
				81	ī	Name		,	<u> </u>		
CORPORATION SERVICE COMPANY			82 Street Ac								
1201 HAYS STREET			•			Street Addre	ss (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301				83	╁						
					1						
				84	ī	City		Fi	85	Zip (Code
SIGNATUR	Signature, typed or printed name of registered agr	ent and title	a if applicable. (NOTE: R	legistered Age	ınt s	ignature required	when reinstating) DA1	TE			
12,	OFFICERS A			13.			ADDITIONS/CHANGES TO OFFICER		DIR	ECTC	RS IN 12
TITLE	CPST		☐ DELETE	1.1 TITLE	1.1 TITLE				Ch	ange	Additio
NAME	BROWN, GARY R			1.2 NAME							•
STREET ADDRES		İ		1.3 STREE	T A	DORESS					
CITY-ST-ZIP	SEWELL NJ 08080			1.4 CITY-S	ST-2	ZIP					
TITLE	C		□ DELETE	2.1 TITLE					Ch	ange	Additio
NAME	CARAMENICO, NICHOLAS J			2.2 NAME							
STREET ADDRES	4-00 MM 114520 144614			2.3 STREE	ŦΝ	D'ORESS					
CITY-ST-ZIP	NORRISTOWN PA 19403			2. 4 ÇITY-	ST-	ZIP					
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CITY-ST-ZIP	<u> </u>			5.4 CITY- 8	31-Z	ZIP					
UDE	1	,	☐ DELETE	6.1 TITLE					□ Ch	ange	☐ Additio

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I 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, with all other like empowered.

FILED

Feb 23, 2000 8:00 am Secretary of State

02-23-2000 90019 040 ***150.00