## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION **ANNUAL REPORT** 



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

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1. Corporation	NVIRONMENTAL MANAGEM	0002114 (5) Ent, Inc.	)		
Principal Place	of Business	Maling Address		I IMBACONE ARID IMIMI MESAN MOTATI MANILI	i mairi darri marka tindr tidah kidit di bi 1801
72 WALL ST NEW YORK		72 WALL STREET NEW YORK NY 10270			
				3. Date Incorporated or Qualified 05/01/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 70 Pine	Street	13-3836962	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8 75 Additional
27 AHn: E.M.		TUCK	5. Commedia of Olatos Desired	Fee Required	
		City & State 28 New York	NY	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	710 707 K	Country	Trust Fund Contribution	Added to Fees
24	25		30	8. This corporation has liability for in Florida Statutes ☐ Yes	ntangible tax under s. 199,032,
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Ro	
			81 Name		
THE PR	ENTICE-HALL CORPORATION SY	/STEM, INC.	82 Street Addr	ress (P.O. Box Number is Not Acceptable	p)
	ays street				
SUITE 1			83		
TALLAH	IASSEE FL 32301		84 City		85 Zip Code
11 Pureuant t	o the provisions of Spetians COV 0509	and 602 1603 Electric Oct.		ation submits this statement for the purp	FL I'' I
l or registeri	ed agent, or both, in the State of Florida th, and accept the obligations of, Section	a. Such change was admonzed	by the corporation's boar	aron submits this statement for the purp rd of directors. Thereby accept the appo	pose of changing its registered office intrinent as registered agent. I am
SIGNATURE _	<del></del>				
12.	Signature, typed or printed har a lot regil treat age if a OFFICERS AND		Fig. 15 feet Agent signature in comes		DATE
TITLE	COBD	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12  Change Addition
NAME	GOLDBERG, ARNOLD J	base f	1.2 NAME		E Stange Addition
STREET ADDRESS	72 WALL STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10270		1.4 CITY - ST-7IP		
TITLE	PD	DELETE	2 1 TITLE		Change Addition
NAME	BENDA, CHARLES		2.2 NAME		
STREET ADDRESS	72 WALL STREET		23 STHEFT ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10270		2.4 CITY ST-ZIP		
TITLE	VD	DELETE	3 1 TALE		Change Addition
NAME	WERNER, STEVEN		3.2 NAME		
STREET ADDRESS	2005 MARKET STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP THLE	NEW YORK NY 19103	DELETE	3.4 City S1-ZiF		500
NAME 3	DOOLEY WHILIAM N		4 1 111116		Change Addition
STREET ADORESS	DOOLEY, WILLIAM N 70 PINE STREET		4.2 NAME		
CITY-ST-ZIP	NEW YORK NY 10270		4.3 STREET ADDRESS 4.4 City - ST-Zip		
TITLE	C	DELETE	5 1 TITLE		Change Addition
NAME	DAVIS, MICHAEL J	_	5.2 NAME		☐ evenings ☐ required
STREET ADDRESS	72 WALL STREET		5.3 STREET ADDRESS		
CITY - ST - ZIP	NEW YORK NY 10270		54 CITY-S1-7 P		
TITLE	\$	DELFIE	6 1 TITLE		Change Addition
NAME	TUCK, ELIZABETH M		62 NAME		<del></del>
STREET ADDRESS	70 PINE STREET		6 3 STREET ADDRESS		

EXX-ST-ZIP NEW YORK NY 10270

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stafed 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 Irustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: Live Leth Make of SIGNING OFFICER OR DIRECTOR

4-25-96 (212)770-7000