

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
 Aug 13 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F95000003182 (1)
 1. Corporation Name

ONSITE ENGINEERING & MANAGEMENT, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 3450 CORPORATE WAY SUITE B DULUTH GA 30136
 Mailing Address: 3450 CORPORATE WAY SUITE B DULUTH GA 30136

3. Date Incorporated or Qualified: 06/30/1995

2. Principal Place of Business: 901 ELKSTONE LAKESIDE RD
 2a. Mailing Address: 901 ELKSTONE LAKESIDE RD
 22. City & State: LINTHICUM MD
 28. City & State: LINTHICUM MD
 24. Zip: 21090 25. Country: USA 29. Zip: 21090 30. Country: USA

4. FEI Number: 52-1822806
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301

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: FL

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: SCOTT FROHME ASSISTANT CONTROLLER Scott Frohme 7/15/98
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BISCIOTTI, STEPHEN J	
STREET ADDRESS	3450 CORPORATE WAY, #A	
CITY-ST-ZIP	DULUTH GA 30136	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DAVIS, JAMES C	
STREET ADDRESS	3450 CORPORATE WAY, #A	
CITY-ST-ZIP	DULUTH GA 30136	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CAREY, JOHN T	
STREET ADDRESS	3450 CORPORATE WAY, #A	
CITY-ST-ZIP	DULUTH GA 30136	
TITLE	SEE ATTACHED	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: SCOTT FROHME B. CIVIL... 7/15/98 (411) 641-5000

CR2E034 (5/98)

Owners

James C. Davis
921 Elkridge Landing Rd.
Linthicum, MD 21090
SSN 194-52-4954 35.95%

Stephen J. Bisciotti
921 Elkridge Landing Rd.
Linthicum, MD 21090
SSN 220-60-8807 30.07%

Officers

John Carey - President/Director
921 Elkridge Landing Rd.
Linthicum, MD 21090
SSN 219-76-2685 3.02%

Michael Salandra - Senior Vice President
921 Elkridge Landing Rd.
Linthicum, MD 21090
SSN 192-48-6576 1.22%

Tom Kerr - Vice President of Finance
921 Elkridge Landing Rd.
Linthicum, MD 21090
SSN 213-86-4418 .42%

Randall Sones - Secretary
7301 Parkway Drive
Hanover, MD 21076 0%

David J. Standeven - Treasurer
921 Elkridge Landing Rd.
Linthicum, MD 21090
SSN 193-44-2818 .42%