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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700000328 (1)

REMI ENVIRONMENTAL, INC.

FILED Mar 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							11891 (611 1961
1177 SUMMER ST. 1177 SUMMER ST.							
STAMFORD CT 06905		STAMFORD CT 06905					
					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	
9 Principal Di	and of Puninger	2a. Mailing Address				01/21/1997 4. FEI Number	Applied For
2. Principal Place of Business		26				1	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_ \$9.75	SQ 75 Additional	
22		27				1 B Cartificate of Status Desired 1 1	Required
City & State		City & State			6. Election Campaign Financing \$5.0	0 May Be	
23		26				d to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the current year I	ntangible
24	25	29	30				□ No
•	9. Name and Address of Current	Registered Agent		1		10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM				81	Name		
1200 S OUTH PINE ISLAND ROAD			f	62	Street Add	et Address (P.O. Box Number is Not Acceptable)	
PLA	ANTATION FL 33324		1				
				83			
			-	84	City	85 Zip	Code
						FL ⁸⁸ ²⁴	
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 Storature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE							
					signature req	pured when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	DRS IN 12
TITLE	DP DELETE		13.	1.1 TITLE		☐ Change	
NAME	NUTTER, W. LEE		1.2 NAME			 •	_ ;
STREET ADDRESS	4400 0144400 07			1.3 STREET ADDRESS			
CITY-ST-ZIP	STAMFORD CT 06905		1	1.4 CITY-ST-ZIP			
TITLE	DS	DELETE	2.1 TITLE			S Change	Addition
NAME	CANNING, JOHN B		2.2 NA	2.2 NAME			
STREET ADDRESS	1177 SUMMER ST.			2.3 STREET ADDRESS			
CITY-ST-ZIP	STAMFORD CT 06905		2. 4 CITY - ST - ZIP				
TITLE	D	DELETE	3.1 TIT			✓ Change	Addition
NAME	GROSS, RONALD M	_	3.2 NA	ME	,	JOHN P.O'GRADY	
STREET ADDRESS	1177 SUMMER ST.				DDRESS	•	
CITY-ST-ZIP	STAMFORD CT 08905		3.4. Cł				
TITLE	V	☐ DELE TÉ	4.1 TIT			Change	☐ Addition
NAME	BRANNON, TIMOTHY H		4. 2 NA	4. 2 NAME			
STREET ADDRESS	4470 SAVANNAH HWY.		4.3 STF	4.3 STREET ADDR			
CITY-ST-ZIP	JESUP GA 31545		4.4 CITY-ST-				1
TITLE	1	☐ DELETE	_	5.1 TITLE		☐ Change	Addition
NAME	AUGUSTE, MACDONALD		5.2 NAI	5.2 NAME			
STREET ADDRESS	1177 SUMMER ST.		5.3 STF	5.3 STREET ADDRESS			
CITY-ST-ZIP	STAMFORD CT 06905			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TIT			Change	Addition
NAME			6.2 NAI	ME	-		l
STREET ADDRESS			6.3 STF	REET AL	DDRESS		
CITY-ST-ZIP			1	Y-ST-			
						to a state of the first of the state of the	1, 7

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 and lat 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 fire receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapted, or or an attrahment with an address.