

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90293 008 ***900.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000000328 (1)
 1. Corporation Name
REMI ENVIRONMENTAL, INC.



Principal Place of Business 1177 SUMMER ST. STAMFORD CT 06905	Mailing Address 1177 SUMMER ST. STAMFORD CT 06905
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/21/1997	
1	26	4. FEI Number 06-1333281		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
27		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
3		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	Zip	Country		
4	25	29	30		

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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
					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 _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
FILE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUTTER, W. LEE	1.2 NAME	
STREET ADDRESS	1177 SUMMER ST.	1.3 STREET ADDRESS	
CITY - ST - ZIP	STAMFORD CT 06905	1.4 CITY - ST - ZIP	
FILE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CANNING, JOHN B	2.2 NAME	
STREET ADDRESS	1177 SUMMER ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	STAMFORD CT 06905	2.4 CITY - ST - ZIP	
FILE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'GRADY, JOHN P.	3.2 NAME	
STREET ADDRESS	1177 SUMMER ST.	3.3 STREET ADDRESS	
CITY - ST - ZIP	STAMFORD CT 06905	3.4 CITY - ST - ZIP	
FILE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANNON, TIMOTHY H	4.2 NAME	
STREET ADDRESS	4470 SAVANNAH HWY.	4.3 STREET ADDRESS	
CITY - ST - ZIP	JESUP GA 31545	4.4 CITY - ST - ZIP	
FILE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AUGUSTE, MACDONALD	5.2 NAME	
STREET ADDRESS	1177 SUMMER ST.	5.3 STREET ADDRESS	
CITY - ST - ZIP	STAMFORD CT 06905	5.4 CITY - ST - ZIP	
FILE	<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 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 a power like empowered.

SIGNATURE: Maedula [Signature] Date: 4-22-99 Daytime Phone #: 203-348-7000

CR2E034 (10/97)