

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90163 016 ***150.00

NR14007 AT

DOCUMENT # F99000004478

1. Entity Name
BUILDING TECHNOLOGY ENGINEERS, INC.



Principal Place of Business
**306 NORTHERN AVE.
BOSTON MA 02205-9022**

Mailing Address
**101 MERRITT SEVEN
7TH FLOOR
NORWALK CT 06851**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
**c/o EMCOR Group, Inc.
Suite, Apt. #, etc.
301 Merritt Seven, ...**

City & State
Norwalk, CT 06851

4. FEI Number **04-2765026**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
T NAME: AIKEN, RICHARD C STREET ADDRESS: 306 NORTHERN AVE CITY-ST-ZIP: BOSTON MA 02205	<input type="checkbox"/> Delete
P NAME: SHAKER, ANTHONY STREET ADDRESS: 306 NORTHERN AVENUE CITY-ST-ZIP: BOSTON MA 02210	<input type="checkbox"/> Delete
EVP NAME: TRIANO, ANTHONY STREET ADDRESS: 101 MERRITT SEVEN CITY-ST-ZIP: NORWALK CT 06851	<input type="checkbox"/> Delete
EVD NAME: JEFFREY, LEVY M STREET ADDRESS: 101 MERRITT SEVEN CITY-ST-ZIP: NORWALK CT 06851	<input type="checkbox"/> Delete
CS NAME: FRANK, DONELAN STREET ADDRESS: 101 MERRITT SEVEN CITY-ST-ZIP: NORWALK CT 06851	<input type="checkbox"/> Delete
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: EVP NAME: Anthony Triano STREET ADDRESS: 301 Merritt Seven CITY-ST-ZIP: Norwalk, CT 06851	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: EVP/Director NAME: Jeffrey M. Levy STREET ADDRESS: 301 Merritt Seven CITY-ST-ZIP: Norwalk, CT 06851	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: Secretary NAME: Frank Donelan STREET ADDRESS: 301 Merritt Seven CITY-ST-ZIP: Norwalk, CT 06851	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank Donelan DATE: 1/15/03 (203) 849-7800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #