

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

FILED

Mar 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K38177 (7)
 1. Corporation Name
ERM ENVIROCLEAN - SOUTH, INC.

Principal Place of Business 9501 PRINCESS PALM AVENUE SUITE 100 TAMPA FL 33619	Mailing Address 9501 PRINCESS PALM AVENUE SUITE 100 TAMPA FL 33619
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3913 Riga Blvd. Suite, Apt. #, etc. 22 TAMPA, FL City & State 23 TAMPA, FL City & State 24 33619 Zip 25 USA Country	2a. Mailing Address 26 3913 Riga Blvd. Suite, Apt. #, etc. 27 TAMPA, FL City & State 28 TAMPA, FL City & State 29 33619 Zip 30 USA Country
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3. Date Incorporated or Qualified 10/12/1988	4. FEI Number 59-2917283	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
GRUBER, PAUL
ERM ENVIROCLEAN-SOUTH, INC.
9501 PRINCESS PALM AVENUE, SUITE 100
TAMPA FL 33619

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3913 Riga Blvd.
83
84 City FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP GRUBER, PAUL 9501 PRINCESS PALM AVE. TAMPA FL	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	3913 Riga Blvd.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D STOUT, JAN 12020 RAIN FOREST ST TAMPA FL	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	11503 GIBRAHAR PI
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D BORUCKI, JOSEPH D 8989 LYNWOOD DR SEMINOLE FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D HERIN, J C 2791 MOORING CT #102 LANTANA FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	D Dan Sewick
STREET ADDRESS		5.3 STREET ADDRESS	8559 Springdale Dr
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Exton, PA 19341
TITLE		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.

SIGNATURE: Jan S. Stout Treasurer Jan S. Stout 1/12/98 813 622-8727

CR2E034 (10/97)