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713/512-6200

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).

SIGNATURE:

Oct 15 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K98891 (0)BOONE WASTE INDUSTRIES, INC. Principal Place of Business Mailing Address % UNITED CORPORATE SERVICES. INC W UNITED CORPORATE SERVICES, INC. 801 NORTHEAST 1677H STREET, SUITE 300 NORTH MIAMI BEACH FL 33162 BOI NORTHEAST 167TH STREET. SUITE 300 NORTH MIAMI BEACH FL 33162 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/28/1989 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1001 59-2978195 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 C T CORPORATION SYSTEM Name 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE BUSSARD, CARL K. JR. NAME 1.2 NAME 2406 N.E. 19TH DRIVE STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE **V**DELETE Change Addition VORIES, RICHARD W. NAME 22 NAME 2406 N.E. 19TH DRIVE STREET ADDRESS 23 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE SITILE DELETE __ Change ___ Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE TITLE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE ___ Change ___ Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 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 tystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attact that it is a supplemental annual report in the corporation of the corporation or the receiver or tystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attact that it is a 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 tystee empowered to execute this report as required by Chapter 607, 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 tystee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this annual report or supplemental ann

ADDRESS	1001 Fannin, Suite 4000 Houston, Texas	1001 Fannin, Suite 4000 Houston, Texas	1001 Famin, Suite 4000 Houston, Texas	1001 Famin, Suite 4000 Houston, Texas	1001 Fannin, Suite 4000 Houston, Texas	1001 Fannin, Suite 4000 Houston, Texas	1001 Fannin, Suite 4000 Houston, Texas	
OFFICE	President	Executive Vice President Chief Financial Officer	Senior Vice President Secretary Sole Director	Vice President Chief Accounting Officer Assistant Secretary	Vice President Treasurer	Vice President Assistant Secretary	Vice President Assistant Treasurer	Assistant Treasurer
OFFICERS	Miller J. Mathews, Jr.	Earl E. DeFrates	Gregory T. Sangalis	Bruce E. Snyder	Ronald H. Jones	Bryan J. Blankfield	Jeffrey A. Draper	Lee A. McCormick