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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M98222 (6)

1. Corporation Name
NRG/RECOVERY GROUP, INC.



Principal Place of Business
C/O OGDEN CORP.
2 PENN PLAZA 26TH FLOOR
NEW YORK NY 10121

Mailing Address
C/O OGDEN CORP.
2 PENN PLAZA 26TH FLOOR
NEW YORK NY 10121-0001

3. Date Incorporated or Qualified 09/13/1988	3a. Date of Last Report 05/01/1996
4. FEI Number 13-3482491	Applied For Not Applicable
5. Certificate of Status Desired <input 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 has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ABLON, R RICHARD	11 TITLE	
NAME	%OGDEN CORP., 2 PENN. PLZA	12 NAME	
STREET ADDRESS	NEW YORK NY	13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	
TITLE	VT WHITMAN, WILLIAM E	21 TITLE	
NAME	40 LANE ROAD	22 NAME	
STREET ADDRESS	FAIRFIELD NJ	23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	VS HOROWITZ, JEFFREY R.	31 TITLE	
NAME	OGDEN PROJ 40 LN RD	32 NAME	
STREET ADDRESS	FAIRFIELD NJ	33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	PD MACKIN, SCOTT G.	41 TITLE	
NAME	% OGDEN PROJECT 40 LN RD	42 NAME	
STREET ADDRESS	FAIRFIELD NJ	43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	VD STONE, BRUCE W.	51 TITLE	
NAME	% OGDEN PROJECT 40 LN RD	52 NAME	
STREET ADDRESS	FAIRFIELD NJ	53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	AS EFFINGER, J. L.	61 TITLE	
NAME	% OGDEN CORP 2 PENN PLZ	62 NAME	
STREET ADDRESS	NEW YORK NY	63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do 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 in the report or supplemental report.

SIGNATURE:

WILLIAM WHITMAN

4/25/97 (212) 868-4331

CR2E034 (9/96)