

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **P06447** (7)  
1. Corporation Name  
**IT ENVIRONMENTAL SERVICES, INC.**

Principal Place of Business <b>466 SW 12TH AVE DEERFIELD BCH FL 3442 US</b>	Mailing Address <b>23456 HAWTHORNE BLVD. TORRANCE CA 90505 US</b>
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>06/17/1985</b>	3a. Date of Last Report <b>04/21/1994</b>
4. FEI Number <b>06-0874413</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required.</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent <b>THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301</b>	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
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HUTCHISON, MURRAY H.</b>	1.2 NAME	
STREET ADDRESS	<b>300 LONG BEACH BLVD.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>STRATFORD CT</b>	1.4 CITY-ST-ZIP	
TITLE	<b>V</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RICE, FRANK C.</b>	2.2 NAME	
STREET ADDRESS	<b>300 LONG BEACH BLVD.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>STRATFORD CT</b>	2.4 CITY-ST-ZIP	
TITLE	<b>P</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHEH, ROBERT B</b>	3.2 NAME	
STREET ADDRESS	<b>400 LONG BEACH BLVD.</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>STRATFORD CT</b>	3.4 CITY-ST-ZIP	
TITLE	<b>S</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SCHWARTZ, ERIC</b>	4.2 NAME	
STREET ADDRESS	<b>400 LONG BEACH BLVD.</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>STRATFORD CT</b>	4.4 CITY-ST-ZIP	
TITLE	<b>V</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DELUCA, ANTHONY J</b>	5.2 NAME	
STREET ADDRESS	<b>400 LONG BEACH BLVD.</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>STRATFORD CT</b>	5.4 CITY-ST-ZIP	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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: *Frank C. Rice* **Frank C. Rice** 2/7/95 310/791-2516