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Mar 28 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 # P16127 (3)
 1. Corporation Name
THE REINFORCED EARTH COMPANY



Principal Place of Business Mailing Address
8614 WESTWOOD CENTER DR. SUITE 1100 VIENNA VA 22182-2233

3. Date Incorporated or Qualified **09/28/1987** 3a. Date of Last Report **04/17/1996**
 4. FEI Number **52-0915467** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 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 Country 28 Zip Country
 24 25 29 30

9. Name and Address of Current Registered Agent
PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	LESGOURGUES, THOMAS	
STREET ADDRESS	8614 WESTWOOD CENTER DR	
CITY- ST- ZIP	VIENNA VA	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	BROWER, ANDREW T	
STREET ADDRESS	8614 WESTWOOD CENTER DR	
CITY- ST- ZIP	VIENNA VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DUCREAUX, JEAN-MARIE	
STREET ADDRESS	8614 WESTWOOD CENTER DR.	
CITY- ST- ZIP	VIENNA VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SIMKIN, R. G	
STREET ADDRESS	8614 WESTWOOD CENTER DR.	
CITY- ST- ZIP	VIENNA VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GALLOIS, PHILIPPE	
STREET ADDRESS	8614 WESTWOOD CENTER DR.	
CITY- ST- ZIP	VIENNA VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCKITTRICK, DAVID P	
STREET ADDRESS	8614 WESTWOOD CENTER DR.	
CITY- ST- ZIP	VIENNA VA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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, changed, or on an attachment with an address.

SIGNATURE: *Andrew T. Brower* **ANDREW T. BROWER** 3/28/97 703-821-1125
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)