

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

FILED  
Apr 14, 1999 8:00 am  
Secretary of State

04-14-1999 90205 030 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P17424

1. Corporation Name  
OLSHAN DEMOLISHING COMPANY, INC.

Principal Place of Business

3003 BUTTERFIELD RD  
OAK BROOK IL 60521  
US

Mailing Address

3003 BUTTERFIELD RD  
OAK BROOK IL 60521  
US

2. Principal Place of Business

21 1001 Fannin  
Suite 4000

22 City & State  
Houston, Texas

23 Zip  
77002

24 Country  
USA

2a. Mailing Address

26 1001 Fannin  
Suite 4000 etc.

27 City & State  
Houston, Texas

28 Zip  
77002

29 Country  
usa

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1987

4. FEI Number

74-1398554

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

7. This corporation owes the current year Intangible

Personal Property Tax

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM

1200 S. PINE ISLAND ROAD

PLANTATION FL 33324

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP  
NAME LANG, MICHAEL A  
STREET ADDRESS 3003 BUTTERFIELD ROAD  
CITY-ST-ZIP OAK BROOK IL 60523

DELETE

TITLE AS  
NAME COZZIE, CARRIE  
STREET ADDRESS 3003 BUTTERFIELD ROAD  
CITY-ST-ZIP OAK BROOK IL 60523

DELETE

TITLE AT  
NAME LANG, MICHAEL A  
STREET ADDRESS 3003 BUTTERFIELD ROAD  
CITY-ST-ZIP OAK BROOK IL 60523

DELETE

TITLE DVP  
NAME PAYNE, A P  
STREET ADDRESS 3003 BUTTERFIELD ROAD  
CITY-ST-ZIP OAK BROOK IL 60523

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President  
1.2 NAME Donald Chappel  
1.3 STREET ADDRESS 1001 Fannin Suite 4000  
1.4 CITY-ST-ZIP Houston, Texas 77002

Change

Addition

2.1 TITLE SVP, Secretary & Sole Director  
2.2 NAME Gregory T. Sangalis  
2.3 STREET ADDRESS 1001 Fannin Suite 4000  
2.4 CITY-ST-ZIP Houston, Texas 77002

Change

Addition

3.1 TITLE VP & Asst. Secretary  
3.2 NAME Bryan Blankfield  
3.3 STREET ADDRESS 1001 Fannin Suite 4000  
3.4 CITY-ST-ZIP Houston, Texas 77002

Change

Addition

4.1 TITLE VP & Treasurer  
4.2 NAME Ronald Jones  
4.3 STREET ADDRESS 1001 Fannin Suite 4000  
4.4 CITY-ST-ZIP Houston, Texas 77002

Change

Addition

5.1 TITLE VP & Asst. Treasurer  
5.2 NAME Jeffrey A. Draper  
5.3 STREET ADDRESS 1001 Fannin Suite 4000  
5.4 CITY-ST-ZIP Houston, Texas 77002

Change

Addition

6.1 TITLE EVP & CFO  
6.2 NAME Earl DeFrates  
6.3 STREET ADDRESS 1001 Fannin Suite 4000  
6.4 CITY-ST-ZIP Houston, Texas 77002

Change

Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bryan J. Blankfield  
Vice President & Assistant Secretary

4/6/1999 713/512-6200  
Date Daytime Phone #

CR2E034 (11/98)