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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32528
1. Corporation Nanie
EARTHWATCH WASTE SYSTEMS, INC.

(2)

## FILED Apr 08 1997 8:00am Secretary of State

Principal Place of Business 3527 HARLEM ROAD BUFFALO NY 14225	Mailing Address 3527 HARLEM ROAD BUFFALO NY 14225-1552			
			3. Date Incorporated or Qualified 01/18/1991	3a. Date of Last Report 06/25/1996
2. Principa: Place of Business 21	2a. Mailing Address 26		4. FEI Number 65-0218190	Applied For Not Applicable
Surte, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country <b>25</b>	Zip 29	Country 30	8. This corporation has liability for Florida Statutes	or intangible tax under s. 199.032,  Yes Mo
9. Name and Address of Current F			10. Name and Address of New I	
THE PRENTICE-HALL CORPORATION S	SYSTEM, INC.	81 Name		
1201 HAYS STREET		82 Street Add	ress (P.O. Box Number is Not Accept	able)
SUITE 105 TALLAHASSEE FL 32301		83		
,		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 a				FLI
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation SIGNATURE Signature, typed or printed norms of registered agent a	ons of, Section 607.0505, Florid etic if applicable. (NOT	orida Statutes. E: Registered Agent signature requ	irad when reinstating)	DATE
12. OFFICERS AND D	DELETE DELETE	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12  Change Addition
NAME WAGNER, LOUIS E.	_ Dettate	1.2 NAME		L] Change L] Addition
STREET ADDRESS 3527 HARLEM ROAD		1.3 SYREET ADDRESS		
CITY - S.F Zi <sup>2</sup> BUFFALO NY 14225		1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition (
NAME		2.2 NAME		
STREEL ADDRESS CHY-SL-ZIP		2 3 STREET ADDRESS 2 4 CITY-ST-ZIP		
TOLE	DELETE	3.1 TITLE		. Change Addition
NAME		3.2 NAME		
STHEET ADDRESS		3.3 STREET ADDRESS		
CH r - ST - 7IP	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TIPLE NAME	f DECEIE	4.1 FULE 4. 2 NAME		En audition En volution
STREET AFTORESS		4.3 STREET ADDRESS		
City (St - 7.2)		4.4 CITY-S1-ZIP		
DREF	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CHY-S1-76°	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAVE	E-4 DELETE	62 NAME		C Orango C Maniton
STREET ADDRESS		6.3 STREET ADORESS		
City St - ZiP		6.4 CITY-ST-ZIP		

4. For 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 senural 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 disease, 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 1 dok 13 if changed, or or an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4/2/97

(716)833-3286