FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 PM 3:20

DOCUMENT # P36292 (1)

1. Corporation Name
REMEDIATION TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
9 POND LAND DAMONMILL SQUARE CONCORD MA 01742	VAN WERT & ZIMMER, P.C. ONE MILITIA DR. STE 8 LEXINGTON MA 02173

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/14/1991
3a. Date of Last Report: 04/13/1994

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

4. FEI Number: 04-2896814 ☐ 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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 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 _____ 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/XXXXXX TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP	1.1 TITLE	Asst. Secretary	☐ Change ☒ Addition
NAME	KNAPP, MICHAEL D	1.2 NAME	Dawn A. Dearborn	
STREET ADDRESS	9 POND LANE	1.3 STREET ADDRESS	386 Red Acre Road	
CITY-ST-ZIP	CONCORD MA	1.4 CITY-ST-ZIP	Stow, MA 01775	
TITLE	S	2.1 TITLE	Director	☐ Change ☒ Addition
NAME	ZIMMER, THOMAS M	2.2 NAME	Norman E. Gaut	
STREET ADDRESS	1 MILITIA DRIVE	2.3 STREET ADDRESS	25 Marrett Street	
CITY-ST-ZIP	LEXINGTON MA	2.4 CITY-ST-ZIP	Lexington, MA 02173	
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	LOEHR, RAYMOND C.	3.2 NAME		
STREET ADDRESS	1301 W. 25TH ST, STE 406	3.3 STREET ADDRESS		
CITY-ST-ZIP	AUSTIN TX	3.4 CITY-ST-ZIP		
TITLE	VD	4.1 TITLE		☐ Change ☐ Addition
NAME	RYAN, JOHN R.	4.2 NAME		
STREET ADDRESS	1011 SW KLICKITAT WAY	4.3 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	DEFIEUX, RICHARD J.	5.2 NAME		
STREET ADDRESS	997 LENOX DR. #3	5.3 STREET ADDRESS		
CITY-ST-ZIP	LAWRENCEVILLE NJ	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	MIDDLETON, ANDREW C.	6.2 NAME		
STREET ADDRESS	3040 WILLIAM PITT WAY	6.3 STREET ADDRESS		
CITY-ST-ZIP	PITTSBURGH PA	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 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 addition.

SIGNATURE: Thomas M. Zimmer 617-862-6404
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED BY DIRECTOR — Date — Daytime Phone #
Thomas M. Zimmer, Secretary

0305604 FP

VAN WERT & ZIMMER, P.C.
ATTORNEYS AT LAW
ONE MILITIA DRIVE
LEXINGTON, MASSACHUSETTS 02173

THOMAS M. ZIMMER
DIRECT DIAL: (617) 862-6404

FACSIMILE: (617) 862-1041

January 19, 1995

State of Florida
Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, FL 32302-1500

RE: Annual Report - Remediation Technologies, Inc.

Dear Sir or Madam:

Enclosed for filing on behalf of the above-referenced corporation is a completed Annual Report form, as well as a check in the amount of $200.00 to cover the filing fee.

Also enclosed is a copy of this letter. Kindly stamp the copy to indicate receipt and return it to the undersigned in the enclosed envelope.

Thank you for your assistance.

Sincerely,

T. M. Zimmer

Thomas M. Zimmer

enclosures