

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90042 043 \*\*\*550.00

**DOCUMENT # P93000048114**

1. Entity Name

**AMERICAN ENVIRONMENTAL LEASING, INC.**

Principal Place of Business

Mailing Address

4068 MT ROYAL BLVD  
SUITE 210  
ALLISON PARK PA 15101  
US

4068 MT ROYAL BLVD  
SUITE 210  
ALLISON PARK PA 15101-2951  
US

2. Principal Place of Business

4990 GRAND AVE.

3. Mailing Address

4990 GRAND AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PITTSBURGH PA

City & State

PITTSBURGH PA

Zip

15225

Country

USA

Zip

15225

Country

USA

4. FEI Number

25-1714594

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST  
STE 105  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME TORRENCE, DAVID  
STREET ADDRESS 4068 MT ROYAL BLVD 210  
CITY-ST-ZIP ALLISON PARK PA

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 14 BLACKBURN ROAD  
CITY-ST-ZIP SEWICKLEY PA 15143

TITLE SD ☐ Delete  
NAME CLARY, SCOTT  
STREET ADDRESS 4068 MT ROYAL BLVD 210  
CITY-ST-ZIP ALLISON PARK PA

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 142 OVERBROOK ROAD  
CITY-ST-ZIP VALENCIA PA 16059

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** DAVID TORRENCE **9-13-00 (412) 262-5700** x221  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)