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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mogham

Secretary of State **
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600030592 (5)

ALLIED ENVIRONMENTAL CONSTRUCTION, INC.

10689 N KENDALL DR SUITE 312

Principal Place of Business

Mailing Address

10889 N KENDALL DR SUITE 312 MIAMI EL 33128-1525

FILED Feb 19 1997 8:00am Secretary of State



MIAMI FL 33176		MIAMI FL 33176-1525						
					3. Date incorporated or Qualified 04/01/1996	3a. Date	e of Last R	eport
2. Principal Place of Business		2a. Mailing Address 25		4. FEI Number	<u></u>	Ar	oplied For	
21						ot Applicable		
Suite, Apt.	#, o tc	Suite, Apt. #, etc.			6. Certificate of Status Desired		7	Additional equired
City & State 23	е	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
<i>Z</i> ip 24	Country 25	Zip 29	Countr 30	у	This corporation has liability for in Florida Statutes		ax under s No	. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	jistered A	gent	
О'В	RIEN, JOHN L		81	Name				
	89 N KENDALL DR SUITE 312		8:	Street Add	ress (P.O. Box Number is Not Acceptab	le)	/	
, MA	MI FL 33176		8:				,	•
ί,			84	City		FL	85 Zip	Code
agent. La SIGNATURE	m familiar with, and accept the oblig				irad when reinstating)	DATE		
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TIFLE	D	DELETE	1.1 TITLE	V	PST		Change	Addition
NAME	O'BRIEN, JOHN L	. 646	1.2 NAME		•			
STREET ADDRESS	10689 N KENDALL DR SUITE	312		T ADDRESS				
CITY-ST-7/P	MIAMI FL 33176	DELETE	1.4 CITY-				Change	Addition
TITLE	ROTHENBURG, MICHAEL W	[] DECEIE	2.1 THILE	18.6	P	٠ .	_≥ Grange	☐ Musconi
NAME STREET ADORESS	42 1ST ST SE SUITE 106		2.2 NAME	T ADDRESS	96 1st AVE. N. #	140		
CITY - ST - ZIP	ST PETERSBURG FL 33701		2.3 SIME 2.14 CITY	1 "	10 1st HUE. N. W.	100		
TITLE	D	DELETE	3.1 TITLE	·····)		Change	Addition
NAME:	TOSTANOSKI, JOHN E		3.2 NAME					
STREET ADDRESS	4715 NW 157TH ST SUITE 2	01	3.3 STRE	ET ADDRESS				
CITY+S1-ZiP	MIAMI FL 33014		3.4. CITY	-ST-ZIP				
TIFLE		DELETE	4.1 TITLE			ſ	Change	Addition
NAME	1		4. 2 NAM	ŧ				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
DITY - ST - ZIP		The eve	4.4 CITY		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TI"L{		☐ DELETE	5.1 TITLE		** ,	ı	Change	Addition
NAME			5.2 NAMI	- 1	* **			
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIP		DELETE	5.4 CITY-				Change	Addition
TITLE		וון טנונונ	6.1 TITLE	1		ļ	orange	TITI MUUNION
NAMé			6.2 NAM	i				
STREET ADDRESS	i	and the second s	6.3 STAE	. r ATHINDLCC I				
CITY - ST - ZIP			6.4 CITY					

4. I do nergoy certify that the mormation supplied with mis hing does not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes. Fluring certify that the information indicated on this arrival report or suppliemental annual root 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.

SIGNATURE:

2/13/91

305-598-7658