

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # √21157			
1. Corporation Name TRANSAMERICAN ENVIRONMENTAL, INC.			
Principal Place of Business 10554 TANNER ROAD HOUSTON TX 77041		Mailing Address 10554 TANNER ROAD HOUSTON, TX 77041	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
3. Date Incorporated or Qualified 03/16/92		3a. Date of Last Report 04/97	
4. FEI Number 65-0326283		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent CT CORPORATION 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		10. Name and Address of New Registered Agent 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 NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT <input type="checkbox"/> DELETE TOM J. FATJO, JR 10554 TANNER ROAD HOUSTON, TX 77041		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREASURER <input checked="" type="checkbox"/> DELETE LANCE C. RUUD 10554 TANNER ROAD HOUSTON, TX 77041		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY <input type="checkbox"/> DELETE J. DAVID GREEN 10554 TANNER ROAD HOUSTON, TX 77041		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR, VP <input type="checkbox"/> DELETE TOM J. FATJO, III 10554 TANNER ROAD HOUSTON, TX 77041		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP, CFO, DIRECTOR <input checked="" type="checkbox"/> DELETE LANCE C. RUUD 10554 TANNER ROAD HOUSTON, TX 77041		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			
2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		TREASURER TOM J. FATJO, III 10554 TANNER ROAD HOUSTON, TX 77041	
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP			
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP			
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		25 5.7	
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		300002520833 -05/12/98--01088--046 ***150.00	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.			
SIGNATURE: Tom J. Fatjo III VP 3-31-98 713-956-1212			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E034 (9/96)