

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

DOCUMENT # **181004** **W99-2756B3**  
1. Corporation Name **Eastern Environmental Services of the Southeast, Inc.**

FILED  
99 DEC -6 PM 4:15  
SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**1001 Fannin Ste 4000 Houston Tx 77002** **1001 Fannin Ste 4000 Houston Tx 77002**

**REINSTATEMENT 95-99**

2. New Principal Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. New Mailing Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida **SP**  
5. FEI Number **59-2847299** Applied For Not Applicable  
6. CERTIFICATE OF STATUS DESIRED  SB 75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PR	Miller Mathews	1001 Fannin Ste 4000 Houston Tx 77002	680003070486-4 -12/15/99--01008--022 ****758.75 ****758.75
VP/Sec	Bryan J. Blankfield	1001 Fannin Ste 4000 Houston Tx 77002	
VP/AT	Robert G. Simpson	1001 Fannin Ste 4000 Houston Tx 77002	
TR	Ronald Jones	1001 Fannin Ste 4000 Houston Tx 77002	
Dir	Bryan J. Blankfield	1001 Fannin Ste 4000 Houston Tx 77002	
VP/AT	Jeffrey Draper	1001 Fannin, Ste 4000 Houston, TX 77002	

8. Name and Address of Current Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City  
State Zip Code  
**CONNIE BRYAN**  
**SPECIAL ASSISTANT SECRETARY**  
REGISTERED AGENT MUST SIGN

9. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City  
State Zip Code  
**CT Corporation System**  
**1200 South Pine Island Road**  
**Plantation FL 33324**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.001, F.S. as to the corporation.  
Signature of Registered Agent **Connie Bryan** **680003070486-4**  
**-12/15/99--01008--023**  
**\*\*\*\*550.00 \*\*\*\*550.00**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes  No  (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.  
SIGNATURE: **Jeffrey A. Draper**, VP **11/30/99**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #