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Feb 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P34497 (8)
1. Corporation Name
LAILAW ENVIRONMENTAL SERVICES (FS), INC.



Principal Place of Business: 220 OUTLET POINTE BLVD. C/O ELAINE MCBRIDE JENKINS HOUSTON TX 77043
Mailing Address: 220 OUTLET POINTE BLVD. C/O PAM KEEFE COLUMBIA SC 29210-5667 US

3. Date Incorporated or Qualified: 06/27/1991
3a. Date of Last Report: 04/17/1996
4. FEI Number: 51-0268319 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

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

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

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: _____ DATE: _____
Sign the name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	WINGER, KENNETH	<input type="checkbox"/> DELETE
NAME		220 OUTLET POINTE BLVD.	
STREET ADDRESS		COLUMBIA SC	
CITY-ST-ZIP			
TITLE	VP	FAUCETT, MICHAEL	<input type="checkbox"/> DELETE
NAME		220 OUTLET POINTE BLVD	
STREET ADDRESS		CLOUMBIA SC	
CITY-ST-ZIP			
TITLE	V	DIEROLF, FREDERICK L.	<input type="checkbox"/> DELETE
NAME		1123 LUMPKIN ROAD	
STREET ADDRESS		HOUSTON TX	
CITY-ST-ZIP			
TITLE	S	TAYLOR, HENRY H.	<input type="checkbox"/> DELETE
NAME		220 OUTLET POINTE BLVD.	
STREET ADDRESS		COLUMBIA SC	
CITY-ST-ZIP			
TITLE	AT	RIDINGS, WILLIAM D.	<input type="checkbox"/> DELETE
NAME		220 OUTLET POINTE BLVD.	
STREET ADDRESS		COLUMBIA SC	
CITY-ST-ZIP			
TITLE	VP	SPRINKLE, DAVID M.	<input type="checkbox"/> DELETE
NAME		220 OUTLET POINTE BLVD.	
STREET ADDRESS		COLUMBIA SC	
CITY-ST-ZIP			

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	Sr. Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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	
6.1 TITLE	Sr. Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 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: x *[Signature]* Henry H. Taylor, V2297, 803-796-2993
DATE: _____ DAYTIME PHONE: _____

CFR2E034 (9/96)