

COMMONWEALTH OF KENTUCKY  
JOHN Y. BROWN III, SECRETARY OF STATE  
ANNUAL REPORT

(See Reverse Side for Filing Instructions)

RECORD # 0114510

DUE JUNE 30, 1997

(4) FILING FEE

15.00

(1) EXACT CORPORATE NAME AND PRINCIPAL OFFICE ADDRESS:

PRISM INTEGRATED SANITATION MANAGEMENT, INC.  
P. O. BOX 524054  
MIAMI, FLORIDA 33152

(5) STATE OR COUNTRY OF INCORPORATION

FL

(2) PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO:

[Empty box for principal office address change]

(6) DATE OF INCORPORATION OR AUTHORIZATION TO TRANSACT BUSINESS

12/29/1978

(3) REGISTERED AGENT AND REGISTERED OFFICE ADDRESS:

C. T. CORP. SYS.  
KY. HOME LIFE BLDG., RM. 1102  
LOUISVILLE, KY. 40202

(7) PLEASE MAIL A STATEMENT OF CHANGE FORM TO:

JUL 7 1997  
SECRETARY OF STATE  
COMMONWEALTH OF KY

Changes made to the registered agent or registered office cannot be made on this form  
See Filing Instructions on reverse side.

PLEASE TYPE OR PRINT THE NAMES AND BUSINESS ADDRESSES OF THE CORPORATION'S CURRENT PRINCIPAL OFFICERS.  
IF SOLE OFFICER, PLEASE CHECK

PRESIDENT SEE ATTACHED

VICE PRESIDENT \_\_\_\_\_

SECRETARY \_\_\_\_\_

TREASURER \_\_\_\_\_

PLEASE TYPE OR PRINT THE NAMES AND BUSINESS ADDRESSES OF THE CORPORATION'S DIRECTORS.

Directors are required to be listed. No listing of directors is verification that the corporation has dispensed with the board of directors. Non-profit corporations must list three (3) or more directors. See Filing Instructions on reverse side.

BOARD OF DIRECTORS SEE ATTACHED

I VERIFY THAT INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

AUTHORIZED SIGNATURE [Signature] TITLE TAX ACCOUNTANT DATE 6-25-97

PROFESSIONAL SERVICE CORPORATIONS ONLY: In addition to the annual report content requirement, there shall be included a list of names and addresses of all shareholders of the professional service corporation and the president shall sign the certificate below.

CERTIFICATE OF PROFESSIONAL SERVICE CORPORATION

I, President of said corporation, do certify that all of the shareholders, not less than one half of the directors, and all officers other than secretary and treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 and a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this statement.

PRESIDENT'S SIGNATURE [Signature]

## OFFICERS

| <u>Name</u>      | <u>Title</u>                            | <u>Address</u>                                   | <u>Date Assigned</u> |
|------------------|---|--|----------------------|
| Ken Creasman     | Chairman and<br>Chief Executive Officer | 1525 Howe Street<br>Racine, WI 53403             | 03/01/95             |
| Paulo Bello      | President                               | 8300 Executive Center Dr<br>Miami, FL 33166-4680 | 03/01/95             |
| Ian MacIlwraith  | Senior Vice President                   | 8300 Executive Center Dr<br>Miami, FL 33166-4680 | 03/01/95             |
| Steven L. Mekeel | Secretary                               | 1525 Howe Street<br>Racine, WI 53403             | 03/01/95             |
| Mimi Parra       | Assistant Secretary                     | 8300 Executive Center Dr<br>Miami, FL 33166-4680 | 03/01/95             |
| Theron W. Moser  | Assistant Treasurer                     | 1525 Howe Street<br>Racine, WI 53403             | 03/01/95             |

## DIRECTORS

|                     |          |   |          |
|---------------------|----------|---|----------|
| David A. Callewaert | Director | 1525 Howe Street<br>Racine, WI 53403              | 03/01/95 |
| Ken Creasman        | Director | 1525 Howe Street<br>Racine, WI 53403              | 03/01/95 |
| Barry P. Harris     | Director | 1525 Howe Street<br>Racine, WI 53403              | 03/01/95 |
| Paulo S. Bello      | Director | 8300 Executive Center Dr.<br>Miami, FL 33166-4680 | 03/01/95 |

