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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 8400 1. Corporation Name

(5)

2. Principal Place of Business 2. A. Mailing Address 2. A. Mailing Address 3. A. FER Number 3. Date of Linal Report 3. Date of	Principal Pl	ace of Business E ROAD EAST NJ. 08540	Mailing Address  600 COLLEGE ROAD EAST PRINCETON NJ 06540-6836 US							
2. Principal Hance of Business   2a. Mainting Address   3. Pet Number   3.29 19779   Not Applicable   Not	05		00							eport
Solite, Apt. #, etc.	2. Principa	l Flace of Business	2a. Mailing Address				4. FEI Number			plied For
27   City & State   City & Country   City & City		and the second s					13-2919779			
Country   28   Country   29   Coun	L	pt #, etc.	<u>}</u>			5. Certificate of Status Desired				
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Country   Coun			—¬ ΄							
Solution	Zip	Country	Zφ	Coun	try	/				. 199.032,
INSURANCE COMMISSIONER CAPTIOL BUILDING TALLAHASSEE FL 32301  82 Sirvert Address (P.O. Box Number is Not Acceptable)  83 84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 67 0502 and 607 1508. Florida Statutes, the commend corporation submits this statement for the purpose of changing its registered eigent. Lambda for the commend of the commend of directors. I hereby accept the appointment as registered eigent, Lambda for the commend of the commend of directors. I hereby accept the appointment as registered eigent, Lambda for the collegations of directors of the purpose of changing its registered eigent, Lambda for the collegations of directors of the collegations of directors. I hereby accept the appointment as registered eigent, Lambda for the collegations of directors of the collegations again end size 4 speciation.  9/01 Engineers Agard specials required after appointment as registered eigent again end size 4 speciation.  9/01 Engineers Agard specials required after appointment as registered eigent agard specials.  9/01 Engineers Agard specials required after appointment as registered eigent agard specials.  9/01 Engineers Agard specials required after appointment as registered eigent agard specials.  9/01 Engineers Agard specials required after appointment as registered eigent agard specials.  9/01 Engineers Agard specials required after appointment as registered eigent, Lambda for the collegation agard specials.  9/02	24			30						
TALLAHASSEE FL 32301  82 Silvest Address (P.O. Box Number is Not Acceptable)  83 Silvest Address (P.O. Box Number is Not Acceptable)  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 agreet. Jan frainfair with, and accept the obligations of Section 607 0505. Florida Statutes  SIGNATURE.  12. OFFICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  OFFICE RS AND DIRECTORS  14. NOWARD  48-O7 2151H STREET  NEW MAN.  15. NOWARD  48-O7 2151H STREET  10. CROSS BUCK ROAD  AASTONICH, HUNARD  48-O7 2151H STREET  10. TOROSS BUCK ROAD  AASTONICH, HUNARD  AASTONI			ent Registered Agent		811	Namo	10. Name and Address of New Re	gistered	Agent	
TALLAHASSEE FL 32301  83  84 City  FL 85 Zip Code  T1. Pursuent to the provisions of Sections 657 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered colors or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered colors or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered colors of the appointment as registered directors. Thereby accept the appointment as registered directors. The accept the accept the accept the a						<u>. i</u>			····	
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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 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, 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, 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, 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, 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, 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, or both, in the State of Florida. Such change as a such accepts the appointment as registered agent, or both and accept the appointment as registered agent, or both accepts. I hereby accept the appointment as registered agent, or both accepts. I hereby accept the appointment as registered agent, or both accepts. I hereby accept the appointment as registered agent, or both accepts. I hereby accept the appointment as registered agent, or both accepts. I hereby accept the appointment as registered agent, and accepts. I hereby accept the appointment as registered agent, and accepts. I hereby accept accepts accepts. I hereby accepts accepts and accepts. I hereby accepts accepts. I hereby accepts accepts and accepts.	"	ELFAPIOCE I E GEGG!		1	B3					
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12.	agent,	I am familiar with, and accept the obt	igations of, Section 607.0505, Flo	orida Statu	ites.	ie corpora	morts board or directors. Thereby acce	hr rite app	CALIFFICITIES	16Bigratoro
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. INTE  14. INTE  15.	SIGNATUR									
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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. HEQUIRED 4/22/97 SIGNATURE:

609-275-2651

0003389

Daytime Phone N

**FILED** 

May 02 1997 8:00am

Secretary of State