## 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 # 1. Corporation Name F9400003552 (6)

AXON - CRR PUBLISHING, INC.

FILED Apr 23 1997 8:00am Secretary of State



Principal Place of Business Mailing Address					_ <del></del>						
747 DRESHER ROAD 747 DRESHER ROAD HORSHAM PA 19044-224											
							ncorporated or Qualified 17/1994		te of Last R /03/1996	eport	
2. Principal P 21	race of Business	2a. Mailing Address 26				4. FEI Nu 23	mber -2532160			plied For Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			<u> </u>	cate of Status Desired	SR 75 Additional				
City & Stat	С	City & State				n Campaign Financing und Contribution	\$5.00 May Be Added to Fees				
Z(p)	Country 25	Ζιρ	30	intry		8. This co	orporation has liability for	intangible	tax under s		
<u></u>	9. Name and Address of Curre		1001		<del>+</del>		and Address of New R				
	DRE, JOANNE D VILLAGE BLVD, STE 140			81 82	Name Street Addr	osa (P.O. Po	Number is Not Accepte	blo)			
WEST PALM BEACH FL 33409				83	258	Me	trocenter	Blvd.	······································		
				84	Suit	<del>(</del> 3		··· ··································	les l Zin /	Cada	
				84	City Wes	T Palm	Beach	FL	85 Zip (	Code 4407	
SIGNATURE.		ont and title if applicable (NOT) AD DIRECTORS	E: Registered	d Age	n) signature require	ad when reinstatin		4	DIRECTOR	S IN 12	
TITLE NAME STREET ADDRESS CITY+SI+ZIP	PCD Kahn, Kenneth 747 Dresher Road Horsham Pa	☐ DELETE	1.1 TO 1.2 NA 1.3 ST 1.4 CO	AME Treet	ADDRESS 1-ZIP		The state of the s		Change	Addition	
TITLE NAME STREET ADDRESS CRY-ST-ZIP		DELETE	2.1 T/ 2.2 N/ 2.3 S/ 2.4 C/	AME TREET	ADDRESS			-	Change	Addition	
TITLE NAME STREET ADDRESS OUT - ST - ZIP		☐ OELETE	3.1 TI 3.2 N/	TLE AME TREET	ADORESS				Change Change	Addition	
THE NAME STREET ADDRESS CITY-ST-Z-2		☐ DELETE	4.1 TO 4. 2 N	ile Iame Ireet	ADORESS	- <del></del>		· <u> </u>	Change	Addition	
TITEF NAME STREET ACORESS C(TY-ST-ZIP)		☐ DELETE	51 TI 52 N	TLE AME REET	ADDRESS			·	Change	Addition	
TILLE NAME STREET ADDRESS OUTY-ST-ZIP		☐ DEFELE	6.1 TI 6.2 N/	TLE AME FREET	ADDRESS				(Change	Addition	
	by certify that the information sumple	od with this films does not avalid				in Section 1	19 07/31/i) Florida Statut	as I further	cortify that	the	

14. I do heroby certify that the information supplied with this filing does not quality 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 chapted, or on an attachment with an address.

SIGNATURE

IGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/4/97 25788094/ Cale Daylone Proce 1