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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003552 (6)

FILED Apr 14 1998 8:00am Secretary of State

AXON - CRR PUBLISHING, INC. **Principal Place of Business** Mailing Address 747 DRESHER ROAD 747 DRESHER ROAD HORSHAM PA 18044 HORSHAM PA 19044 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/07/1994 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 23-2532160 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country Zip This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name FIORE, JOANNE Kenneth 2581 METROCENTER BLVD Street Address (P.O. Box Number is Not Acceptable) 82 STE 3 **B3** WEST PALM BEACH FL 33407 Zip Code Beach 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. I am familie with, and accept the obligations of, Section 607 0605, Florida Statutes. Signature, typicd or printed martie of tegestimed agent and title of applicative SIGNATURE d Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 1 TITLE KAHN, KENNETH **CR2E034** MAME 1.2 NAME 360 Hiatt Drive 747 DRESHER ROAD 1.3 STREET ADDRESS STREET ADDRESS HORSHAM PA Palm Beach Gardens 33418 City - ST - ZIP 1.4 CITY - ST- ZIP Change DELETE 2.1 TITLE Addition NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 City-ST-ZiP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I 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 and an attractiment with an address.

SIGNATURE:

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