UNIFORM BUSINESS REPORT (UBR)

FILED Apr 20, 2004 8:00 am Secretary of State FOR PROFIT CORPORATION

DOCU 1. Entity Nam ATM H	9	1			04-20-2004 90035 038 ***150.00			
	DO NOT WRITE	IN THIS S	SPAC	E		44031930		
			<i>)</i> 1 AU	-		* * * * * * * * * * * * * * * * * * *		
	Place of Business user Road #, etc.	3. Mailing Address 345 Rouser R Suite, Apt. #, etc.	345 Rouser Road			DO NOT WRITE IN THIS SPACE		
City & Stat	te Olis, PA	City & State Coraopolis, PA			4. FE	El Number 25-16966 77	Applied For Not Applicable	
Zip 15108	Country USA	Zip 15108	Count USA	ry	5. Co	ertificate of Status Desired	8.75 Additional se Required	
					7. Nan	ne and Address of Current Registered A	gent	
				Name Th	ne-Prentice-Hall-Gorporation-System -Inc.			
DO NOT WRITE					ess (P.O. Box Number is Not Acceptable)			
	IN THIS SPACE			1201 Hay ^{City} T allah		s Street, Suite 105		
						e FL	32301	
	Signetive, lyced or printed neme of registered agent inuary 1 - May 1. Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 k Payable to Florida Department of		- Common St.	Agent signature re	ngan transcent gert agent a relativ	DATE B. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS	42.		1411			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & CEO / Di Francis H. Azur 345 Rouser Road Coraopolis, PA 1510			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President Melanie B. Gefert 345 Rouser Road Coraopolis, PA 15108		1 1 1 1		in the state of th			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP / Secretary / Director Christopher F. Azur 345 Rouser Road Coraopolis, PA 15108				DO-NOT-WRITE			
TOTLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President / Treasurer Christina A. Duranko 345 Rouser Road Coraopolis, PA 15108					IN THIS SPACE		
NAME STREET ADDRESS CHY-ST-ZIP	Vice President / CFO / Director David M. Azur 345 Rouser Road Coraopolis, PA 15108			ET ADDRESS ST-ZIP			Hard Control of the C	
TITLE NAME			TITLE	s - 1 1 1 1 1				

12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 10 or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

David M. Azur

4/12/04

(412) 299-6200