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

PROFIT CORPORATION ANNUAL REPORT

1998



FLOHIDA DEPARTMENT OF STATE

Sandra B. Mortham

Feb 17 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

NORWAY

CITY - ST - ZIP

SIGNATURE:

F96000003385 (9)

NYCOMED INC.

| Principal Place of Business | | Mailing Address | | | | BOLLI BOHLI OBAR BOLL | de inide nilei ifi | ili isti ilili |
|----------------------------------|--|---|---|--------------------------------|--|---|-------------------------------|----------------------------|
| 101 CARNEGIE CENTER | | 101 CARNEGIE CENTER | | | | | | |
| PRINCETON NJ 08540 | | PRINCETON NJ 08540 | | | TO NO. | WOITE IN THIS | פרואפר | |
| İ | | | | | 3. Date Incorporated or Qua | WRITE IN THIS | SPACE | |
| | | | | | | Mileo | | |
| 9. Principal Pi | lace of Business | 2a. Mailing Address | | | 07/03/1996 4. FEI Number | | I IAr | oplied For |
| 21 | ado di Dasimoni | 26 | | | 13-3786405 | | | ot Applicable |
| Suite, Apt. | #. etc | Suite, Apt. #, etc. | | | | | \$8.75 | |
| 22 | | 27 | | 5. Certificate of Status Desir | red 🔲 | Fee Re | | |
| Crty & State | e | City & State | | | 6. Election Campaign Finan | cing | \$5.00 | May Be |
| 23 | | 28 | | | Trust Fund Contribution | | Added t | |
| Zip Country | | Zip | , · · · · · · · · · · · · · · · · · · · | | 8. This corporation owes or | | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax du | | | J No |
| | 9. Name and Address of Curren | t Registered Agent | 8. | Nome | 10. Name and Address of N | lew Registered | Agent | |
| | CORPORATION SYSTEM | | 8 | Name | | | | |
| 1200 SOUTH PINE ISLAND ROAD | | | 8 | Street | Address (P.O. Box Number is Not Ad | ess (P.O. Box Number is Not Acceptable) | | |
| į PL | ANTATION FL 33324 | | 8: | , | | | | |
| | | | 0. | ' | | | | |
| ļ | | | 84 | City | | FL | 85 Zip (| Code |
| Office or re | to the provisions of Sections 607 050, egistered agent, or both, in the State in familiar with, and accept the obliga Signature typed or peaked same of received age. | of Florida. Such change was itions of, Section 607.0505, F | authorized b lorida Statute | iy the con es. | corporation submits this statement for poration's board of directors. I hereby erequired when reinstating) | or the purpose o y accept the app | f changing it pointment as | s registered registered |
| 12. | Signature Typed or profest same of recisionst ago: OFFICERS AND | | 13. | gent signature | ADDITIONS/CHANGES TO | | DIRECTOR | S IN 12 |
| TITLE | PO | DELFTE | 1.1 TITLE | | 1 | 0111021101111 | Change | Addition |
| NAME | PETERS, DANIEL L | | 1.2 NAME | | | | _ | |
| STREET ADDRESS | 101 CARNEGIE CENTER | | 1.3 STREE | T ADDRESS | | | | |
| CITY-ST-ZIP | PRINCETON NJ | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | Vī | DELETE | 2.1 TITLE | | VT | | Change | Addition |
| NAME | JOHANNESSEN, PETTER | , . | 2 2 NAME | | VITO PULITO | - 4 5 7 7 7 | -0 | |
| STREET ADORESS | 101 CARNEGIE CENTER | | 2.3 STREE | T ADDRESS | 101 CARNEGIE | CENIE | } F | |
| CITY - ST - ZIP | PRINCETON NJ | | 2. 4 CITY | -ST-ZIP | VITO PULITO 101 CARNEGIE PRIMETONA | JJ 08. | 540 | |
| TITLE | V | DELETE | 3 1 TITLE | | | | Change | Addition |
| NAME | GIORDANO, THOMAS | | 3.2 NAME | | | | | |
| STREE1 ADDRESS | 101 CARNEGIE CENTER | | 3 3 STAEL | T ADDRESS | | | | |
| CITY - ST - ZIP | PRINCETON NJ | | 3.4. CITY | -ST - ZIP | | | 1 0 | A dans |
| TITLE | VS | ☐ DELETE | 41 THLE | | | | Change | Addition |
| NAME | FREEDMAN, JEFFREY | | 4. 2 NAM | | | | | |
| STREET ADDRESS | 101 CARNEGIE CENTER | | | T ADDRESS | | | | |
| CITY - ST - ZIP | PRINCETON NJ | DC+F70 | 4 4 CITY- | | | | Change | Addition |
| TITLE | D AAOED OVENI | ☐ DELETE | 5 1 TITLE | | | | ☐ Cusuilia | - Annual |
| NAME | AASER, SVEIN | A OLEMON OWNER | 5 2 NAME | | | | | |
| STREET ADDRESS | POSTBOKS 5010 MAJORSTU | A, OLEMUALSVEIEN | 4 | T ADDRESS | | | | |
| CITY - ST - ZIP | NORWAY | DELETE | 5.4 CITY- | | | | Change | Addition |
| TITLE | D PEDGED TROMIN | m retrit | 61 TIFLE | | | | | المسامد ب |
| NAME | BERGER, TROND POSTBOKS 5010 MAJORSTU | IA CI EMPAI CVEIEN | 6.2 NAME | | | | | |
| STREET ADDRESS | COSIDONS DI DE MANDIO | m, olemualoveien | ■ b3 SIRE | T ADDRESS | 1 | | | |

14. Thereby 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 suppliemental sential 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 of the precision of the p 609-514-6408 2/6/90