

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Aug 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P25311** (2)
1. Corporation Name
SIEMATIC CORPORATION



Principal Place of Business 3331 STREET RD 450 BENSALEM PA 19020 US	Mailing Address 3331 STREET RD 450 BENSALEM PA 19020 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 07/25/1989	3a. Date of Last Report 06/26/1996
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 95-3504669	Applied For <input type="checkbox"/> Not Applicable
City & State 23		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24	Country 25	Zip 29	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIEKMANN, A.W.	1.2 NAME	
STREET ADDRESS	4972 LOEHNE 1	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST GERMANY	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOLMSSEN, PETER Y	2.2 NAME	
STREET ADDRESS	2000 ONE LOGAN SQUARE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	2.4 CITY-ST-ZIP	
TITLE	CEO <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIEKMANN, RANK W	3.2 NAME	CEO
STREET ADDRESS	886 TOWN CENTER DRIVE	3.3 STREET ADDRESS	SIEKMANN, FRANK
CITY-ST-ZIP	LONGHORNE PA	3.4 CITY-ST-ZIP	3331 STREET ROAD
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	BENSALEM, PA 19020
NAME		4.2 NAME	V.P.
STREET ADDRESS		4.3 STREET ADDRESS	JOHN J. MARSHALL
CITY-ST-ZIP		4.4 CITY-ST-ZIP	3331 STREET ROAD
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	BENSALEM, PA 19020
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, on an attachment with an address.

SIGNATURE:

[Signature] 7/1/97

CR2E034 (4/97)