

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90021 007 ****61.25

DOCUMENT # 739800

1. Entity Name

WORLDTEAM U.S.A., INC.

Principal Place of Business

1431 STUCKERT ROAD
WARRINGTON PA 18976
US

Mailing Address

1431 STUCKERT ROAD
WARRINGTON PA 18976
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1759927

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORGAN, CHARLES O., JR.,
1300 NORTHWEST 167TH STREET
NORTH MIAMI FL 33169

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **REIMER, CLARENCE**
STREET ADDRESS **11920 MATTHEWS COURT**
CITY-ST-ZIP **FAIRFAX VA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TDS** ☐ Delete
NAME **SMITH, PHYLLIS**
STREET ADDRESS **307-A1 EMMONS DRIVE**
CITY-ST-ZIP **PRINCETON NJ**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **FARTHING, PHILIP**
STREET ADDRESS **999 WATERSIDE DR**
CITY-ST-ZIP **NORFOLK VA 23510**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **WRIGHT, BARNEY**
STREET ADDRESS **695 CARSON DRIVE**
CITY-ST-ZIP **LEBANON OH**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **CAIN, CURT**
STREET ADDRESS **1455 YORKTOWN DRIVE**
CITY-ST-ZIP **LAWRENCEVILLE GA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **COTTE, MORRIS**
STREET ADDRESS **856 FIVE POINT RD.**
CITY-ST-ZIP **VA BEACH VA**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **DALE LEATHEAD**
STREET ADDRESS **13 ROSE COURT**
CITY-ST-ZIP **NEW HOLLAND, PA 17557**

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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Leonard Maliska
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEONARD MALISKA

PRESIDENT

7/20/00

Date

215-491-4900

Daytime Phone #

CR2E037 (5/00)