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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State IVISION OF CORPORATIONS

1999		DI
DOCUMENT # 6 1. Corporation Name FML MIAMI, INC.	38282	

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90014 027 \*\*\*150.00

1 MIL MIL	1441, 114O-								
Principal Place	e of Business	Mailing Addres	ss					Alāls Atāsi Alasi atai	i Biati arbii ida:
250 KING OF P		250 KING OF PE	RUSSIA RD						
RADNOR PA 19		RADNOR PA 190					DO NOT WRITE IN	THIS SPACE	
ļ						İ	3. Date Incorporated or Qualifed		
							10/02/1979		
2. Principal P	lace of Business	2a. Mailing Add	dress				4. FEI Number	<b>⊢</b>	Applied For
21		26					23-2127744		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.				5. Certifcate of Status Desired		Additional Required
City & Stat	e	City & State	e				6. Election Campaign Financing	\$5.0	May Be
23		28			_		Trust Fund Contribution	Adde	to Fees
Zip	Country	Zip Country			,	_	8. This corporation owes the current ye	ar Intangible	<u> </u>
24	25	29	30				Personal Property Tax.	□Yes	X No
	9. Name and Address of Currer	it Registered Agent	<u> </u>		_		10. Name and Address of New Regist	ered Agent	
				81	N	ame	•		
	CORPORATION SYSTEM			82	S	treet Addres	ss (P.O. Box Number is Not Acceptable)		<del>-</del>
_	S. PINE ISLAND ROAD			1	) .				
PLA	NTATION FL 33324			83					1
				84	C	ity		FL 85 Zij	Code
11 -Pursuant	to the provisions of Sections 607,050	2 and 607.1508. Flc	orida.Statutes.	the above	L e-na	med corpor	ation submits this statement for the purpo	se of changing i	ts registered
) office or a	anistared examt or both in the State	of Elorida, Such cha	יתוווב פבינו סממכ	OTTEN DV	ina	corporation	's board of directors. I hereby accept the	appointment as	registered
agent. I a	m familiar with, and accept the obliga	itions of, Section ou	7.0505, Piorida	Statutes	·•				
SIGNATURE	Signature, typed or printed name of registered age	int and title if annicuhle	(NOTE: Re	gistered Ager	nt sìar	vature required y	when reinstating) DA	TE	
12.		ND DIRECTORS	(1012,113	13.			ADDITIONS/CHANGES TO OFFICER	RS AND DIRECT	FORS IN 12
TITLE	TPD		DELETE	1.1 TITLE				☐ Change	
NAME	MULLIN, ARTHUR W			1.2 NAME					
STREET ADDRESS	250 KING OF PRUSSIA RD			1.3 STREET	TADE	RESS			
CITY-ST-ZIP	RADNOR FL 19087			1.4 CITY-S					
TITLE	VD VD		DELETE 2.1 TIT					☐ Change	Addition
NAME	TAYLOR, WILLIAM S	_	i	2.2 NAME					
STREET ADDRESS	250 KING OF PRUSSIA RD		Ì	2.3 STREET	TADE	RFSS			)
	RADNOR FL 19087			2.4 CITY-S					
CITY-ST-ZIP TITLE	VD		DELETE	3.1 TITLE	,,- <u></u>			☐ Change	e Addition
NAME	KELICAN, JAMES W	_	-	3.2 NAME				_	,
	250 KING OF PRUSSIA RD.			3.3 STREET	T AIT	DRESS			1
STREET ADDRESS	RADNOR PA 19087		İ	3.4. CITY-9					
CITY-ST-ZIP TITLE	\$	П	DELETE	4.1 TITLE	11-716			☐ Chang	e Addition
NAME	BIXLER, ROBERT			4. 2 NAME					l
STREET ADDRESS	250 KING OF PRUSSIA RD.			4.3 STREET		DRESS			
	RADNOR PA 19087			4.3 STREE			•		
CITY-ST-ZIP			DELETE	5.1 TITLE	1-21	-	<del></del>	☐ Chang	e Addition
NAME	AS TAMASITIS, MARGARET	_		5.2 NAME		1			İ
1				5.3 STREE		RESS			
STREET ADDRESS	RADNOR PA 19087			5.4 CITY-S					
CITY-ST-ZIP	האטווטה דא ושטטו		DELETE	6.1 TITLE		<del></del>		Chang	e Addition
	}	Ь	5252.2	6.2 NAME					_
NAME	I					1			
OTDECT LODGE-0				6.3 STREET	T ADD	DRESS			
. STREET ADDRESS CITY-ST-ZIP				6.3 STREET		ì			

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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARGARET M TAMASITIS, ASSISTANT SECRETARY ASSISTANT SECRETARY