SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 03 1998 8:00am
Secretary of State

DOCUMENT # 739800 (1)

1. Corporation Name
WORLDTEAM U.S.A., INC.

Principal Place of Business	Mailing Address
1431 STUCKERT ROAD WARRINGTON PA 18976 US	1431 STUCKERT ROAD WARRINGTON PA 18976 US

3. Date Incorporated or Qualified: 08/12/1977
4. FEI Number: 59-1759927 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

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

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	REIMER, CLARENCE		1.2 NAME		
STREET ADDRESS	11920 MATTHEWS COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	FAIRFAX VA		1.4 CITY-ST-ZIP		
TITLE	TDS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, PHYLLIS		2.2 NAME		
STREET ADDRESS	307-A1 EMMONS DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	PRINCETON NJ		2.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	HARDIOSN, RICH		3.2 NAME	RICH HARDISON	
STREET ADDRESS	7120 GANBY STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	NORFOLK VA		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WRIGHT, BARNEY		4.2 NAME		
STREET ADDRESS	695 CARSON DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	LEBANON OH		4.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	CAIN, CURT		5.2 NAME		
STREET ADDRESS	1455 YORKTOWN DRIVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	LAWRENCEVILLE GA		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	COTTLE, MORRIS		6.2 NAME		
STREET ADDRESS	856 FIVE POINT RD.		6.3 STREET ADDRESS		
CITY-ST-ZIP	VA BEACH VA		6.4 CITY-ST-ZIP		

CR2E037 (5/98)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Leonard Kamalesky Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #