2001 UNIFORM BUSINESS REPORT (UBR)

May 17, 2001 8:00 am § Secretary of State **DOCUMENT # 739800** 1. Entity Name 05-17-2001 91314 038 ****61.25 WORLDTEAM U.S.A., INC. Principal Place of Business Mailing Address 1431 STUCKERT ROAD 1431 STUCKERT ROAD WARRINGTON PA 18976 WARRINGTON PA 18976 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1759927 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O., Box, Number is Not Acceptable). MORGAN, CHARLES O., JR., -1300 NORTHWEST 167TH STREET NORTH MIAMI FL 33169 City 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 DATE Stonature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PD ■ Addition Change TITLE ☐ Delete TITLE REIMER, CLARENCE NAME NAME 11920 MATTHEWS COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FAIRFAX VA TDS ☐ Addition TITLE ☐ Delete TITLE Change SMITH, PHYLLIS NAME NAME 307-A1 EMMONS DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PRINCETON NJ CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition FARTHING, PHILIP NAME NAME 999 WATERSIDE DR STREET ADDRESS STREET ADDRESS NORFOLK VA 23510 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition WRIGHT, BARNEY NAME NAME 695 CARSON DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEBANON OH CITY-ST-ZIP חע TITLE ☐ Delete TITLE ☐ Change ☐ Addition CAIN, CURT NAME NAME STREET ADDRESS 1455 YORKTOWN DRIVE STREET ADDRESS CITY-ST-ZIP LAWRENCEVILLE GA CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition LEATHEAD, DALE NAME NAME 13 ROSE COURT STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

NEW HOLLAND PA 17557

CITY-ST-ZIP

5/8/01

215-491-4900