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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation Name EICHLEAY CORPORATION Principal Place of Business 6585 PENN AVE PITTSBURGH PA 15206 Mailing Address 6585 PENN AVE PITTSBURGH PA 15206 PITTSBURGH PA 15206					
				3. Date Incorporated or Qualified 07/31/1950	3a. Date of Last Report 03/20/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	1 26 Suite, Apt. #, etc Suite, Apt. #,			25-0458265	Not Applicable
22				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	City & State City &			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζίρ [<u></u>]	Country	Z(p	Country	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
24	25 9. Name and Address of Curren		30	10. Name and Address of New Re	
C1	CORPORATION SYSTEM	<u></u>	81 Name		
	1200 S. PINE ISLAND ROAD			Iress (P.O. Box Number is Not Acceptate	nie)
PLANTATION FL 33324					
			83		
			84 City		B5 Zip Code
11 Durange	t to the expussions of Sections 607.050	2 and 607 1508 Florida State	tes the shove named cor	poration submite this statement for the	FL By Zip Code
office or agent 1	registered agent or both, in the State am fam fiar with, and accept the obliga-	of Florida. Such change was ations of, Section 607.0505, F	authorized by the corpora- lorida Statutes.	poration submits this statement for the pation's board of directors. I hereby acception	pt the appointment as registered
SIGNATURE	Signative typed or profed name of registers of age	ent and trite if applicable. (NC	TE: Registered Agent signature requ	ired when reinstating)	DATE
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TOLE	SD CONTRACTOR	☐ DELETE	1 1 TITLE		Change Addition
NAME	BORMAN, JOHN G 6585 PENN AVENUE		1.2 NAME		
STREET AUDRESS	PITTS, PA 00000		1.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE	T)	DELETE	1.4 GITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	EICHLEAY, G F		2.2 NAME		Emi Avenille Emi version i
STREET ADDRESS	OFOE DENIN AVE		2.3 STREET ADDRESS		
CHY ST-ZP	PITTS, PA 00000		2 4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	31 TITLE	***************************************	Change Addition
NAME	NELSON JR THEODORE W		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		į
CITY ST ZIP	PITTS PA		3.4. CITY-ST-ZIP		
TITLE	TD	☐ DELETE	4.1 TITLE		L.J. Change L.J. Addition
NAME	NUNEZ, JOHN R. 6585 PENN AVE		4, 2 NAME		
STREET ADDRESS	PITTS PA		4.3 STREET ADDRESS		
CHY-S1-ZIP TiTLE	FILIDEN	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		L PECCIE	5.2 NAME		tool orwigo tool enderthin
STREET ADDRESS			5.3 STREET ADDRESS		
Offy-S1-2IP	, 		5.4 CITY-ST-ZIP		
11111	and the same of th	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	3		6.3 STREE1 ADDRESS		
l .					<u>'</u>

John G. Bolom Societhay

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 or on an attachment with an address.

FILED

Apr 16 1997 8:00am

Secretary of State

412.363.9000

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