


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 26, 2007 8:00 am**  
**Secretary of State**

02-26-2007 90062 005 \*\*\*150.00

<b>DOCUMENT # 827429</b>	
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1. Entity Name  
FORMATION, INC.

Principal Place of Business  
121 WHITTENDALE DRIVE  
MOORESTOWN, NJ 08057

Mailing Address  
121 WHITTENDALE DRIVE  
MOORESTOWN, NJ 08057

40024016



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02202007

Chg-P

CR2E034 (12/06)

4. FEI Number  
22-1909393

Applied For  
Not Applicable

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME LUBERT, IRA  
STREET ADDRESS 1811 CHESTNUT ST.  
CITY-ST-ZIP PHILADELPHIA, PA 19103

TITLE D ☐ Delete  
NAME PAMPEL, ROLAND  
STREET ADDRESS 2 CARBRIER LANE  
CITY-ST-ZIP MYSTIC, CT 06355

TITLE D ☐ Delete  
NAME BEARD, ART  
STREET ADDRESS 121 WHITTENDALE DR  
CITY-ST-ZIP MOORESTOWN, NJ 08057

TITLE D ☐ Delete  
NAME BRAGG, GEORGE L  
STREET ADDRESS 19512 SIERRA MIA RD  
CITY-ST-ZIP IRVINE, CA 92612

TITLE PD ☐ Delete  
NAME EVATT, NIM  
STREET ADDRESS 121 WHITTENDALE DRIVE  
CITY-ST-ZIP MOORESTOWN, NJ 08057

TITLE CT ☐ Delete  
NAME WORTHMAN, CHARLES A  
STREET ADDRESS 121 WHITTENDALE DRIVE  
CITY-ST-ZIP MOORESTOWN, NJ 08057

TITLE D ☒ Change ☐ Addition  
NAME IRA WBEZT  
STREET ADDRESS THE CIRA CENTER  
CITY-ST-ZIP 2929 ARCH ST., PHILA, PA 19104

TITLE D ☒ Change ☐ Addition  
NAME PAMPEL ROLAND  
STREET ADDRESS 686 KATEMORE LANE  
CITY-ST-ZIP NAPLES FL 34108

TITLE D ☐ Change ☒ Addition  
NAME Ken McNamara  
STREET ADDRESS 121 Wh. Hendale DR  
CITY-ST-ZIP moorestown, NJ 08057

TITLE D ☐ Change ☒ Addition  
NAME HOWARD ROSS  
STREET ADDRESS 1811 Chestnut St.  
CITY-ST-ZIP Philadelphia, PA 19103

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/07 (856) 234-5020

Date

Daytime Phone #