

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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 828839 (1)
 1. Corporation Name
TRANSPORT INTERNATIONAL POOL, INC.



Principal Place of Business 426 W LANCASTER AVE DEVON PA 19333 US	Mailing Address 426 W LANCASTER AVE DEVON PA 19333 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/13/1972	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
4. FEI Number 22-1616203	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
		85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS <input type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GILES, TRACIE BUTLER	1.2 NAME	R. TODD BRADLEY
STREET ADDRESS	426 W. LANCASTER AVENUE	1.3 STREET ADDRESS	426 LANCASTER AVE
CITY-ST-ZIP	DEVON PA	1.4 CITY-ST-ZIP	DEVON PA
TITLE	VPC <input type="checkbox"/> DELETE	2.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SZUTAK, TOM	2.2 NAME	STEWART B. KOENIGSBERG
STREET ADDRESS	426 W LANCASTER AVE	2.3 STREET ADDRESS	426 LANCASTER AVE
CITY-ST-ZIP	DEVON PA	2.4 CITY-ST-ZIP	DEVON PA
TITLE	VPS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BREEDLOVE, JAMES	3.2 NAME	
STREET ADDRESS	426 LANCASTER AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEVON PA	3.4 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOREE, JIM	4.2 NAME	
STREET ADDRESS	40 LIBERTY BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	MALVERN PA	4.4 CITY-ST-ZIP	
TITLE	VPT <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLAY, ROGER	5.2 NAME	
STREET ADDRESS	426 W. LANCASTER AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	DEVON PA	5.4 CITY-ST-ZIP	
TITLE	ES <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARNAROLI, FELICIA	6.2 NAME	
STREET ADDRESS	426 LANCASTER AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	DEVON PA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(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.

SIGNATURE *James Loree* #127/100 110-1116-1117

CR2E034 (10/97)