## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Socretary of State

Secretary of State

	1996	COO WE TO	DIVISION	OF CORPOR	ATIONS				
DOCUN 1. Corporation	/ENT #	833065	(6)						
C. I. 3	CORP.					LIGHT AND ALLES ALLES ALLES			E1611 6.811 1881
Principal Place of	of Business		Mailing Address			I IODIO HAIDO LIXED IXINI ODDIO I	INIDI DILI BIRIF D	IIII 31011 G1011	AIRII OLDAI 1001
725 CONSHO BALA CYNWY	HOCKEN STATE D PA 19004	ROAD	725 CONSHOHOCK BALA CYNWYD PA		DAD				
						3. Date Incorporated or Qualified 09/23/1974		te of Last Re 04/03/19	•
2. Principal Plac	ce of Business		2a. Mailing Address	-		4. FEI Number		<b></b>	Applied For
Suite, Apt. #	oto		Suite, Apt. #, etc.			23-1953984			Not Applicable Additional
30ite, Apt. #	, etc.		27			5. Certificate of Status Desired			Required
City & State			City & State			6. Election Campaign Financing			May Be
<b>Z</b> ip		Country	<b>Z</b> ip	Cou	ntrv	Trust Fund Contribution  8. This corporation has liability for			199 032
24	25	Southly	29	30	,		es 🔀 No	an anon o	100.002,
		Address of Current	<u> </u>	<del></del>	,	10. Name and Address of New	Registered	Agent	
					81 Name				
	PORATION SY				82 Street Add	ress (P.O. Box Number is Not Accept	able)		
	PINE ISLAND				83				
PLANIA	TION FL 33324								
					84 City		FI	85   Z <sub>i</sub> r	Code
11. Pursuant to or registere familiar with	o the provisions of ad agent, or both, n, and accept the	f Sections 607,0502 a in the State of Florida obligations of, Section	nd 607.1508, Florida Sta . Such change was autho n 607.0505, Florida Statu	tutes, the aborized by the tes.	ve-named corpo corporation's boa	oration submits this statement for the pard of directors. Thereby accept the ap		nanging Its n s registered	egistered office agent. I am
familiar with	n, and accept the	obligations of, Section	d title if applicable.	(NOTE: Registered	ve-named corpo corporation's boa	ed when renslating	Durpose of cloppointment a		
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signatures	h, and accept the	obligations of, Section and name of registered agent an OFFICERS AND	n 607.0505, Florida Statu ditile if applicable. DIRECTORS	(NOTE: Registered	Agent signature require	ed when renslating	Durpose of cloppointment a	D DIRECTO	RS IN 12
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR