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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 838025

Principal Place of Business

(5)

Mailing Address

GAGE-BABCOCK & ASSOCIATES, INC.

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| Feb 05 | 1997 | 8:00am |
| Secret | tary o | f State |

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| SUITE 310 FAIRFAX VA 22033-2924 | 3975 FAIR RIDGE DR NOI SUITE 310 FAIRFAX VA 22033-2924 | RTH | | |
|---|--|--|---|--|
| | | | 3. Date Incorporated or Qualified 03/14/1977 | 3a. Date of Last Report 05/01/1996 |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 213975 Fair Ridge Drive | 26 3975 Fair Ri | age urive | 44-0567890 | Not Applicat |
| Suite, Apt #, etc 22 Suite 310, North | Suite Apt. #, etc. 27 Suite 310, N | orth | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| Fairfax, VA Zip Country | 28 Fairfax, VA | O | Trust Fund Contribution | Added to Fees |
| 2422033-2924 25 | | Country 30 | | Yes No |
| 9, Name and Address of Curre | ent Hegistered Agent | 81 Name | 10. Name and Address of New Re | gistered Agent |
| CT CORPORATION SYSTEM | | oi Ivaille | | |
| 1200 S. PINE ISLAND ROAD | | 82 Street | Address (P.O. Box Number is Not Acceptab | le) |
| PLANTATION FL 33324 | | 83 | | |
| | | | | |
| | | 84 City | | EL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607 05 | 02 and 607 1508. Florida Statute | as the above-named | corporation submits this statement for the n | urnose of changing its registere |
| office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obli- | e of Florida. Such change was a | uthorized by the corr | poration's board of directors. I hereby accept | of the appointment as registered |
| SIGNATURE Societion, typed or poster clame of registered a | and and title Landiscapita (NOTE | Registered Agent signature | required when restricted | DATE |
| | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFIC | |
| TITLE PD | DELETE | 1.1 TITLE | | ☐ Change ☐ Additi |
| NAME JAEGER, THOMAS | | 1.2 NAME | | |
| STREET ADDRESS 3975 FAIR RIDGE DR N STE | 310 | 1.3 STREET ADDRESS | | |
| CITY-SI-ZIP FAIRFAX VA 22033-2924 | | 1.4 CITY - ST - ZIP | | |
| TIPLE D | DELETE | 2.1 TITLE | *************************************** | X Change Additi |
| | | | | |
| NAME BRADLEY, FREDERICK C. | | 2.2 NAME | | |
| | | 2.2 NAME 2.3 STREET ADORESS | | |
| STREET ADDRESS 6855 JIMMY CARTER BLVD | | 2.3 STREET ADDRESS | Norcross. GA 30071-123 | 16 |
| STREET ADDRESS 6855 JIMMY CARTER BLVD NORCROSS GA | ★] DELETE | 2.3 STREET ADDRESS | Norcross, GA 30071-123 D | 6 |
| STREET ADDRESS 6855 JIMMY CARTER BLVD NORCROSS GA TITLE D | X DELETE | 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP | D | |
| STREET ADDRESS 6855 JIMMY CARTER BLVD NORCROSS GA TITLE D NAME AMAR, MICHAEL A | | 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME | D Hahl, Charles E. | Change 🛣 Additi |
| STREET ADDRESS 6855 JIMMY CARTER BLVD NORCROSS GA TITLE D NAME AMAR, MICHAEL A 1 CENTERPOINTE DR SUTTE | | 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | D Hahl, Charles E. 3975 Fair Ridge Drive; | ☐ Change ※ Additi |
| STREET ADDRESS CITY-ST-7IP NORCROSS GA TITLE D NAME STREET ADDRESS CITY-ST-7IP LA PALMA CA 6855 JIMMY CARTER BLVD NORCROSS GA 1 CENTERPOINTE DR SUITE LA PALMA CA | | 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP | D Hahl, Charles E. | ☐ Change ※ Additi |
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| STREET ADDRESS CITY-ST-7IP NORCROSS GA TITLE D NAME AMAR, MICHAEL A 1 CENTERPOINTE DR SUITE LA PALMA CA TITLE DS NAME ANTONETTI, MARIO A. | 240 ☐ DELETE | 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME | D Hahl, Charles E. 3975 Fair Ridge Drive; Fairfax, YA 22033-292 DS Antonetti, Mario A. | Change & Additi Suite 310, North 4 K Change Additi |
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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P08360

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HOLMAN ENTERPRISES, INC.

| Private Ulkar, (1) | | · · · · · · · · · · · · · · · · · · · | | |
|--|--|---|---|--|
| Principal Place of Business | Mailing Address | | | imer mattes datuse beiter dette beiter etter |
| 7411 MAPLE AVE. PENNSAUKEN NJ 08109 | 7411 MAPLE AVE. PENINSAUKEN NJ 08108- | 2946 | | |
| | | | 3. Date Incorporated or Qualified 12/10/1985 | 3a. Date of Last Report 03/19/1996 |
| 2. Principal Place of Business | 28. Mailing Address | | 4. FEI Number | Applied For |
| en Control Anna Anna Anna Anna Anna Anna Anna Ann | 26 | | 21-0610247 | Not Applicable |
| Suité, Apt. #. etc. 2 | Surte, Apt. #, etc. | | 6. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip Country | Zip | Country | 8. This corporation has liability for in | |
| 25 | 29 | 30 | | Yes No |
| | f Current Registered Agent | | 10. Name and Address of New Reg | |
| REIF, DANIEL S | | 81 Name | | |
| 911 N.E. SECOND AVE. | | 82 Street Ado | dress (P.O. Box Number is Not Acceptable | e) |
| FT. LAUDERDALE FL 33304 | | | | |
| | | 83 | | |
| | | 84 City | # ! | FL 85 Zip Code |
| 11 Purculant to the transferance of Cactions | 607 0502 and 607 1509 Florida Ctat | too the shows parred see | | |
| office or registered agent, or both, in t | the State of Florida, Such change was | authorized by the corpora | poration submits this statement for the pu ation's board of directors. I hereby accept | irpose of changing its registered I the appointment as registered |
| | | | | |
| | the obligations of, Section 607.0505, F | lorida Statutes. | | |
| SIGNATURE | | | | |
| SIGNATURE Stocker toped to postercione of re- | ystered agent and tile happosable (NC | TE: Registered Agent signature requ | ilted when reinstating) | DATE |
| SIGNATURE Signature toped to particular extremal to 12. OFFIC | | TE: Registered Agent signature requ | | DATE ERS AND DIRECTORS IN 12 |
| SIGNATURE Stocker together perfectioned free 12. OFFIC Inter CD | ystered agent and tille harviolable (NC ERS AND DIRECTORS | TE: Registered Agent signature requ | ilted when reinstating) | DATE |
| SIGNATURE Stockhold typed on poches same of rice 12. OFFIC TITLE CD HOLMAN, J. S. | ystered agent and tille harviolable (NC ERS AND DIRECTORS | TE: Registered Agent signature requirement 13. | ilted when reinstating) | DATE ERS AND DIRECTORS IN 12 |
| SIGNATURE Stockhold typed to poster same of re- 12. OFFICE TITLE CD HOLMAN, J. S. STREEL ADDRESS 7411 MAPLE AVENUE | ystered agent and tille harviolable (NC ERS AND DIRECTORS | 13. 11 TITLE 1 2 NAME 1.3 STREET ADDRESS | ilted when reinstating) | DATE ERS AND DIRECTORS IN 12 |
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SIGNATURE:

K. T. COPPOLA, VICE-PRES FINANCE JAN 1,1997 609-663-5200