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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90086 011 ***150.00

DOCUI	MENT # 850985	5					
	ERNATIONAL, INC.						
Principal Place	e of Business	Mailing Address		.,,			811 Q1Q13 (8 8 1
ONE LEVITT PARKWAY ONE LEVITT PARKWAY							
WILLINGBORO NJ 08046		WILLINGBORO NJ 08046		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
					11/10/1981		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21 26					06-0949514		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			. ~	~-	5: Certificate of Status Desired	\$8.75 .A Fee Red	
22		27					-
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to	
23 Zip	Country	Zip	Country		This corporation owes the current year In		
24	25		10		Personal Property Tax.		□No
24	9. Name and Address of Curre		,,,		10. Name and Address of New Registered	d Agent	
			81	Name			İ
CT CORPORATION SYSTEM			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
1200 S. PINE ISLAND ROAD							
PLAI	NTATION FL 33324		83				
			84	City		85 Zip C	ode
					For poration submits this statement for the purpose of		
office or r	registered agent, or both, in the Stat im familiar with, and accept the obliq	e of Florida. Such change was aut gations of, Section 607.0505, Florid	thorized by da Statutes	the corporati	ion's board of directors. I nereby accept the appr	pintment as reg	jistered
12.	Signature, typed or printed name of registered a	gent and title if applicable (NOTE: R	13.	t signature require	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12
TITLE	DP OFFICERS A	DELETE	1,1 TITLE			Change	Addition (
NAME	RICHTER, IRV		1.2 NAME				
STREET ADDRESS	li		1.3 STREET	ADDRESS			
CITY-ST-ZIP	CHERRY HILL NJ		1.4 CITY-S	r-ZIP	<u></u>		
TITLE	VS	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	RICHTER, DAVID L		22 NAME				
STREET ADDRESS	1 LEVITT PARKWAY		2.3 STREET	ADDRESS			
CITY-ST-ZIP	WILLINGBORO NJ		2. 4 CITY-S	T-ZIP	dent and		
TITLE	VPC	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	emma, ronald f.		3.2 NAME				į
STREET ADDRESS	***** ***** * * * * * * * * * * * * *		3.3 STREET	- 1			
CITY-ST-ZIP	WILLINGBORO FL_	☐ DELETE	3 4. CITY-S	T-ZIP		☐ Change	Addition
TITLE			4.1 TITLE			CT overige	
NAME			4. 2 NAME 4.3 STREET	ADDRESS			
STREET ADDRESS			4.4 CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME		_	5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY- S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE	<u> </u>		☐ Change	Addition
NAME			6.2 NAME				
	1		6.3 STREET	ADDRESS			ļ

14. I 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 open attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PONALD F. GUMA

609-871-5800