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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

	NOR/WESTON CORPORA	TION						
Principal Place of Business  1801 MARKET S PHILADELPHIA PA 19103 US		Mailing Address  1801 MARKET ST PHILADELPHIA PA 19103 US		1 18810   1918   8116 81118   1813	B1(0)   B(()   0)\$	A BURAN BUBA	f 879/1 649/1 8/8/1 16/	
		US			3. Date Incorporated or Qualified 06/30/1983	3a. Dat	e of Last 02/22	•
<del>-</del> 7	lace of Business	2a. Mailing Addi	ress		4. FEI Number	- L	VEICE	Applied For
Suite, Apt.	# atc	26			23-2257797			Not Applicable
2		Suite, Apt. #	. etc.		5. Certificate of Status Desired			5 Additional Required
City & Stat	e	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.	<b>00</b> May Be
Zip	Country 25	Ζιρ <b>29</b>	Co.	untry	8. This corporation has liability for	intangible ta	ax under	s 199.032,
	9. Name and Address of Curre	ent Registered Agent	1301	T	Florida Statutes Yes  10. Name and Address of New I	No No		
				81 Name	The same and Address of New I	refisieted	-gent	<del></del>
	ORPORATION SYSTEM			82 Street Add	lress (P.O. Box Number is Not Acceptat	-1-		
1200 S. PINE ISLAND ROAD						oie)		
PLAN	TATION FL 33324			83		<del></del>		
				had			loc l	Ip Code
				84 City				
Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida	a Statutes, the abo		ration submits this statement for the pu	FL.	,   [	•
GNATURE	in, and accept the obligations of, Sec	otion 607.0505, Florida (	Statutes	ove-named corpo corporation's boa	ration submits this statement for the pured of directors. I hereby accept the app		,   [	•
SNATURE _	Signature by end or product manager from should epo	otion 607.0505, Florida (	a Statutes, the above authorized by the obtained by the obtain	ove-named corpo corporation's boa	we resons	rpose of cha ointment as	anging its registere	registered office d agent. I am
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oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes. I further oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NOW OF SIGNING OFFICER OR DIRECTOR