FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 MAY -2 AM 7:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 857702 (5)

1. Corporation Name
SERMATECH INTERNATIONAL INCORPORATED

600001484736
-05/11/95--01101--011
****200.00 ****200.00

Principal Place of Business	Mailing Address
155 SOUTH LIMERICK RD. LIMERICK PA 19468	155 SOUTH LIMERICK RD. LIMERICK PA 19468

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/12/1983
3a. Date of Last Report: 03/30/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
4. FEI Number: 23-1942996 ☐ Applied For ☐ Not Applicable
Suite, Apt #, etc. — 22
Suite, Apt #, etc. — 27
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State — 23
City & State — 28
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip — 24
Country — 25
Zip — 29
Country — 30
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable — (if) Registered Agent signature required when membership

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	11 TITLE	Vice President	☒ Change ☐ Addition
NAME	BLACKHAM, WILLIAM R.	12 NAME		
STREET ADDRESS	5 FIELDSTONE LANE	13 STREET ADDRESS		
CITY ST ZIP	AVON CT	14 CITY ST ZIP		
TITLE	PD	21 TITLE		☐ Change ☐ Addition
NAME	CARRIKER, ROY C.	22 NAME		
STREET ADDRESS	502 NORTHFIELD RD.	23 STREET ADDRESS		
CITY ST ZIP	DEVON PA	24 CITY ST ZIP		
TITLE	S	31 TITLE		☐ Change ☐ Addition
NAME	CHANCE, STEVEN K.	32 NAME		
STREET ADDRESS	341 CROTON ROAD	33 STREET ADDRESS		
CITY ST ZIP	WAYNE PA	34 CITY ST ZIP		
TITLE	VD	41 TITLE		☐ Change ☐ Addition
NAME	YOUNG, MICHAEL W.	42 NAME		
STREET ADDRESS	107 CIRCLE DR.	43 STREET ADDRESS		
CITY ST ZIP	CHALFONT PA	44 CITY ST ZIP		
TITLE	T	51 TITLE		☐ Change ☐ Addition
NAME	MCCABE, JAMES F., JR.	52 NAME		
STREET ADDRESS	134 CAROUSE CIRCLE	53 STREET ADDRESS		
CITY ST ZIP	NEW BRITAIN PA	54 CITY ST ZIP		
TITLE	V	61 TITLE		☐ Change ☐ Addition
NAME	MOSSER, MARK	62 NAME		
STREET ADDRESS	155 S. LIMERICK ROAD	63 STREET ADDRESS		
CITY ST ZIP	LIMERICK PA	64 CITY ST ZIP		

RC

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 the 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 F. McCabe Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0477260 FP