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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # 857702 (5)

1. Corporation Name
SERMATECH INTERNATIONAL INCORPORATED

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

Mailing Address
155 SOUTH LIMERICK RD.
LIMERICK PA 19468-1603

3. Date Incorporated or Qualified: 09/12/1983
3a. Date of Last Report: 03/25/1996
4. FEI Number: 23-1942996 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. # etc.
27
City & State
28
Zip 29 Country 30

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 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~V~~ ☐ DELETE	1.1 TITLE	Asst. Secretary ☐ Change ☒ Addition
NAME	~~BLACKHAM, WILLIAM R.~~	1.2 NAME	Herbert K. Zear Ross
STREET ADDRESS	~~5 FIELDSTONE LANE~~	1.3 STREET ADDRESS	165 S. Limerick Road
CITY-ST-ZIP	~~AVON CT~~	1.4 CITY-ST-ZIP	Limerick, PA 19468
TITLE	PD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	CARRIKER, ROY C.	2.2 NAME	
STREET ADDRESS	502 NORTHFIELD RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEVON PA	2.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	3.1 TITLE	Director/Secretary ☒ Change ☐ Addition
NAME	CHANCE, STEVEN K.	3.2 NAME	
STREET ADDRESS	341 CROTON ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WAYNE PA	3.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	YOUNG, MICHAEL W.	4.2 NAME	
STREET ADDRESS	107 CIRCLE DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	CHALFONT PA	4.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MCCABE, JAMES F., JR.	5.2 NAME	
STREET ADDRESS	134 CAROUSE CIRCLE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRITAIN PA	5.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	MOSSER, MARK	6.2 NAME	
STREET ADDRESS	155 S. LIMERICK ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	LIMERICK PA	6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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 on an attachment with an address.

SIGNATURE: [signature] JAN 21 1997 (610) 948-2887
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #