## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

SIGNATURE:

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## May 03, 2001 8:00 am Secretary of State DOCUMENT # F93000001365 1. Entity Name DAVMIC CORP. 05-03-2001 91159 040 \*\*\*150.00 Principal Place of Business Mailing Address C/O STEVEN J. CLITES C/O STEVEN J. CLITES 701 ALPHA DRIVE 701 ALPHA DRIVE PITTSBURGH PA 15238 PITTSBURGH PA 15238 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 25-1580999 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL/32301 City Zip Code 8. The above named 9 g its registered office or registered agent, or both, in the State of Florida itity submits this ose ocha RICHARD H. NIMTZ 3-1-2001 marked Advent signal and the Environ reinstating) SIGNATURE edespitent if elitib and trans be FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE CETD ☐ Delete SHAPIRA, DAVID S NAME STREET ADDRESS STREET ADDRESS 101 KAPPA DRIVE CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15238 TITLE ☐ Delete ☐ Change ☐ Addition NIMTZ, RICHARD H NAME NAME STREET ADDRESS 101 KAPPA DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PITTSBURGH PA 15238 VASD ☐ Delete TITLE Change Addition. BURGO, RAYMOND J NAME NAME STREET ADDRESS STREET ADDRESS 101 KAPPA DRIVE CITY-ST-ZIP CITY-ST-7IP PITTSBURGH PA 15238 ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information indicated on this report or supplem of the corporation or the received. of supplied with this filing does not qualify for the montal report is true and accurate and that mys of trastee empowered to execute this report as exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an officer or director equired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

RICHARD H. NIMTZ

PRESIDENT

963-6200

Daytime Phone #

FILED