FILE NO	W: FILING FEE AF	TER MAY 1 IS	\$22	5.00		~	
COF	RPORATION JAL REPORT 1998	FLORIDA DEPAR Sandra B Secretary DIVISION OF C	TMENT OF Mortham y of State	STATE		( <u>)</u>	
DOCUMENT # F9300000 452 Le					FILED		
1. Corporation Name				98 MAY 18 PM 3: 17			
AGP Acquisition Corp.				St. One tak f OF STATE			
Principal Place of Business Mailing Address					TALLAHASSEE,	, FLORIDA	
Principal Place of Business Mailing Address							
					E IN THIS SPACE.		
					3. Date incorporated or Qualified October 8, 1993	3a. Date of Last Report	
2. Principal Place of Business 21. Mailing Address 21. 11875 High Tech Ave. 26. 1018 West N			ndila Acc		4, FEI Number	Applied For	
Suite, Apt. #, etc Suite, Apt. #, etc.			nui Ave	<del>?.</del>	59-3203461 5. Certificate of Status Desired	\$8.75 Additional	
22 Surite 200 27 City & State City & State				<del></del>	Gentificate of States Desired     Flection Campaign Financing	Fee Required	
23 Orlando, Florida 28 King of			ssia, Pennsylvania		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country Zip Zip 24 32817 25 USA 29 19406			Countr	isa.	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  No		
9. Name and Address of Current Registered Agent				Name	10. Name and Address of New	Registered Agent	
Corporation Service Company				<u></u>	(D.O. Day N. mbar in No. Accessor	H(A)	
1201 Hays Street					ss (P.O. Box Number is Not Accepta	Die)	
Tallahassee, Florida 32301			83	<u>'</u>			
<u></u>				City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607 0592 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered opent, or both, in the State of Clorida 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 appointment of the purpose of changing its registered office or registered agent. Or both, in the State of Clorida 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 appointment as registered agent. I am							
familiar with ans ac April fine obligations of , Secrifin 607 0505, Florida Statutes.  SIGNATURE							
12.	Signature thand or printed nanyfor registered agent ar OFFICERS AND		Registered Age	nt signature required v	. <del> </del>	DATE FICERS AND DIRECTORS IN 12	
TITLE	Director and President		1 1 TITLE		ADDITIONS OF IAINGES TO OF I	Change Addition	
NAME STREET ADDRESS	Lawrence M. Davies		1 2 NAME		900002	25274896	
CITY-ST-ZIP	1018 West Ninth Ave. King of Prussia, Pennsylvania 19406		1 3 STREET ADDRESS 1 4 CITY - ST - ZIP			• [	
TITLE NAME	Vice President		2 1 TITLE			Change Addition	
STREET ADDRESS	Stanley F. Szczygiel 1018 West Ninth Ave.		2 2 NAME 2 3 STREET ADDRESS				
CITY-ST-ZIP	King of Prussia, Pennsylvania 19406			CITY - S1 - ZIP			
TITLE NAME	Treasurer Mark D. Gibson		3 1 TITLE 3 2 NAME			Change Addition	
STREET ADDRESS	1018 West Ninth Ave.		3.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	King of Prussia, Pennsylvania 19406 Secretary		3.4 CITY - 1 4.1 TITLE	ST-ZIP		Change Addition	
NAME	Robert A. Quimetue		4 2 NAME	1			
STREET ADDRESS CITY - ST - ZIP	237 Park Ave., 20th Floor New York, New York 10017		4.3 STREE				
TIFLE	NEW TOLK, NEW TOLK TOO		44 CITY - S 5 1 TITLE	51-214	· <u></u>	Change Addition	
NAME STREET ADDRESS			5 2 NAME				
STREET ADDRESS CITY+ST-ZIP			53 STREET				
TITLE			61 THILE			Change Addition	
NAME STREET ADDRESS			62 NAME 63 STREET	ADDRESS			
CITY-ST-ZIP			6 4 CITY - 5	ST - ZVP			
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)(k). Floods 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 trustee emplowered to execute this report as required by Chapter 607, Floods Statutes; and that my name							
appears in Block 12 or Block 13 if changed, or on an attachipent with an address							
SIGNATURE: Robert A. Outmette 5/15/98 (212) 880-6000  BIGHATURE: Date Prior 4							



ACCOUNT NO. : 072100000032

REFERENCE :

822518

4311859

AUTHORIZATION

COST LIMIT :

\$ 558.75

ORDER DATE: May 18, 1998

ORDER TIME: 11:55 AM

ORDER NO. : 822518

CUSTOMER NO:

4311859

CUSTOMER:

Lee J. Hirsch, Esq

Haythe & Curley 237 Park Ave.

20th Floor

New York, NY 10017-3142

CHANGE OF AGENT

NAME:

AGP ACQUISITION CORP.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

CONTACT PERSON: Stacy L Earnest