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Mar 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000004730 (6)

1. Corporation Name
MSS-DELAWARE, INC.

Principal Place of Business
7 W. 7TH ST.
CINCINNATI OH 45202

Mailing Address
7 W. 7TH ST.
CINCINNATI OH 45202-2424



3. Date Incorporated or Qualified 09/28/1995
3a. Date of Last Report 02/01/1996

4. FEI Number 31-1443880
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

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and true if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	BRODERICK, DENNIS J	
STREET ADDRESS	7 W. 7TH ST.	
CITY - ST - ZIP	CINCINNATI OH	
TITLE	VSD	☐ DELETE
NAME	SIMS, JOHN R	
STREET ADDRESS	7 W. 7TH ST.	
CITY - ST - ZIP	CINCINNATI OH 45202	
TITLE	DC	☐ DELETE
NAME	ZIMMERMAN, JAMES M	
STREET ADDRESS	7 W. 7TH ST.	
CITY - ST - ZIP	CINCINNATI OH 45202	
TITLE	V	☐ DELETE
NAME	SEPPELT, ROBERT C	
STREET ADDRESS	7 W. 7TH ST.	
CITY - ST - ZIP	CINCINNATI OH 45202	
TITLE	V	☐ DELETE
NAME	NAY, GARY J	
STREET ADDRESS	7 W. 7TH ST.	
CITY - ST - ZIP	CINCINNATI OH 45202	
TITLE	TAS	☐ DELETE
NAME	HOGUET, KAREN M	
STREET ADDRESS	7 W. 7TH ST.	
CITY - ST - ZIP	CINCINNATI OH	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME	Mills, John	
1.3 STREET ADDRESS	131 Market Street	
1.4 CITY - ST - ZIP	Newark, NJ 07102	
2.1 TITLE	AS	☐ Change ☒ Addition
2.2 NAME	Cox, Jack	
2.3 STREET ADDRESS	7 W. 7th St.	
2.4 CITY - ST - ZIP	Cincinnati, OH 45202	
3.1 TITLE	AS	☐ Change ☒ Addition
3.2 NAME	Ziermaier, Klaus	
3.3 STREET ADDRESS	7 W. 7th St.	
3.4 CITY - ST - ZIP	Cincinnati, OH 45202	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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:

Jack B. Cox

Jack B. Cox, Assistant Secretary 2/20/97 513-579-7311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)