

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000005678 (6)

1. Corporation Name
ROEDIGER PITTSBURGH, INC.



Principal Place of Business
3612 ROUTE 8
ALLISON PARK PA 15101

Mailing Address
3612 ROUTE 8
ALLISON PARK PA 15101

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/21/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 25-1344246	
22	City & State	27	City & State	Applied For Not Applicable	
23	Zip	28	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24	Country	29	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		30		6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET 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 _____ (Signature typed or printed of registered agent and officer applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	GIBSON, DAVID E	1.2 NAME	MAKUS ROEDIGER
STREET ADDRESS	3612 ROUTE 8	1.3 STREET ADDRESS	3612 ROUTE 8
CITY-ST-ZIP	ALLISON PARK PA	1.4 CITY-ST-ZIP	ALLISON PARK, PA
TITLE	V	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	TESLIK, NORMAN W	2.2 NAME	
STREET ADDRESS	3612 ROUTE 8	2.3 STREET ADDRESS	
CITY-ST-ZIP	ALLISON PARK PA	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	RUBINO, A J	3.2 NAME	
STREET ADDRESS	3612 ROUTE 8	3.3 STREET ADDRESS	
CITY-ST-ZIP	ALLISON PARK PA	3.4 CITY-ST-ZIP	
TITLE	CD	4.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	HOLZMANN, MICHAEL	4.2 NAME	Robert Huth
STREET ADDRESS	KINZIGHEIMER WEG 104-106	4.3 STREET ADDRESS	KINZIGHEIMER WEG 104-106
CITY-ST-ZIP	D-63450 HANAU GERMANY	4.4 CITY-ST-ZIP	D-63450 Hanau, Germany
TITLE	VD	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	KUTSCHERA, V	5.2 NAME	
STREET ADDRESS	KINZIGHEIMER WEG 104-106	5.3 STREET ADDRESS	
CITY-ST-ZIP	D-63450 HANAU GERMANY	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: _____

James Rubino

11/15/98 412-487-6910

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