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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

DOCUMENT # F9600006003 (5)

FILED Jan 29 1998 8:00am Secretary of State

AMERI	CAN LONG LINES, INC.				
Principal Plan	ce of Business	Mailing Address			ISA NDERI NDIEL DDEEL NDEEL NELE DOES NEEL NEEL SIELE
410 HORSHAM RD. PO BOX 449 HORSHAW PA 18044 410 HORSHAW PA 19044				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				11/18/1996	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4-00	HORSHAM ROAD	26 400 HORS	HAM RD	23-2430439	Not Applicable
Suite, Apt.	#, etc. Box 449	Suite Apt # stc.	449	5. Certificate of Status Des	sired \$8.75 Additional Fee Required
City & Stat	RSHAM PA	City & State 28 HORSHA	y PA	Election Campaign Fina Trust Fund Contribution	
Zip 9 1	Country 25 MONTGOMERY	Zip	Country 10 Northmen		r has paid the current year Intangible
	9. Name and Address of Current	Registered Agent	7701	10. Name and Address of	
BL	ANTON, EDWIN F		81 Name		
82	5 THOMASVILLE RD. LLAHASSEE FL 32303		82 Street A	ddress (P.O. Box Number is Not A	.cceptable)
"	CON MODEL I C GEODO		83		
			84 City		85 Zip Code
 office or r 	registered agent, or both, in the State of	l Florida. Such chan ce w as au	thorized by the corpo	corporation submits this statement oration's board of directors. I herek	for the purpose of changing its registered by accept the appointment as registered
	am familiar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statutes.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered Agent signature re	equired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTORS IN 12
TITLE	PDC	☐ DELETE	1.1 TITLE		Change Addition
NAME	WIDRA, ALAN		1.2 NAME		
STREET ADDRESS	410 HORSHAM RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	HORSHAW PA 19044	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	CARBONE, RICK	La seccie	2.2 NAME		E phange E Abdition
STREET ADDRESS	410 HORSHAM RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	HORSHAW PA 19044		2. 4 CITY- ST-ZIP		
TITLE	S	☐ DECETE	2.4.7171.5	5	Change Addition
NAME	REED JAMES		3.2 NAME	REED, JAMES	
STREET ADDRESS	REED, JAMES 400 HORSHAM ROA	Ď	3.3 STREET ADDRESS	REED, JAMES 400 HORSHAM R HORSHAM PA	-D
CITY-ST-ZIP	HORSHAM PA		3.4. CITY - ST - ZIP	HORSHAM PA	19044
TITLE	•	DELETE	4.1 TITLE	•	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		☐ nerese	5 1 TITLE		Change Addition
NAME CYDEET ADDRESS			5.2 NAME		
STREET ADDRESS			5.4 City-St-ZiP		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME		—	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	certify that the information supplied with	this tiling does not qualify for		in Section 119.07(3)(i), Florida Sta	atutes. I further certify that the information

I. I hereby certify that the information supplied with this third 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 amous 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 husten employed 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.

CIONATURE.

2 Must

9/00 215 AAZ 91