

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

1

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
 98 MAY 18 PM 3: 35  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT #** 197000000093  
 1. Corporation Name  
**XLCONNECT SYSTEMS, INC.**

Principal Place of Business: **411 Eagleview Blvd. Exton, PA 19341**  
 Mailing Address:

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>January 7, 1997</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>23-22844307</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24	Country	29	Zip	7. 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**

**The Prentice-Hall Corporation System, Inc.**  
 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of the person named as registered agent and new Treasurer (NOTE: Registered Agent signature required when re-stating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
<input type="checkbox"/> DELETE	Timothy Wallace President 411 Eagleview Blvd. Exton PA 19341	<input type="checkbox"/> Change <input type="checkbox"/> Addition	700002526917
<input type="checkbox"/> DELETE	Stephanie Cohen VP & Secretary 411 Eagleview Blvd. Exton PA 19341	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	Timothy Wallace Director 411 Eagleview Blvd. Exton PA 19341	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	Richard Sanford Director 411 Eagleview Blvd. Exton PA 19341	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	Barry Abelson Director 3000 Two Logan Square Phila. PA 19103	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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:** \_\_\_\_\_ **5/15/98**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)

*Handwritten signature and date:*  
 [Signature] 5/18/98



**THE UNITED STATES CORPORATION**  
COMPANY

(2)

RECEIVED

98 MAY 18 AM 11:40

ACCOUNTING STATE  
DEPARTMENT OF CORPORATIONS  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

072100000032

REFERENCE : 808303 4322441

AUTHORIZATION

*Patricia Pizut*

COST LIMIT : \$ 558.75

ORDER DATE : May 6, 1998

ORDER TIME : 10:15 AM

ORDER NO. : 808303-095

CUSTOMER NO: 4322441

CUSTOMER: Paula C. Worn, Legal Assistant  
Intelligent Electronics, Inc.  
411 Eagleview Blvd.

Exton, PA 19341

ANNUAL REPORT FILING

NAME: XLCONNECT SYSTEMS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS:

*Solacy*  
*5/18/98*