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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 20002044 (2)

FILED May 04 1998 8:00am Secretary of State

1. Corporation AMERIA	CAN FINANCIAL SYSTEMS.	INC.			
Principal Place of Business Maiting Address					ABILO LIDIA DALIL BIBLI BIBLI 1001
9 RIVERSIDE OFFICE PARK 9 RIVERSIDE OFFICE PA WESTON MA 02183 WESTON MA 02183		ARK	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	IIS SI AGE
				04/17/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		04-2842018	Not Applicable
<u>├</u>		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27				4. Certificate of Status Desired	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	1 Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible Tes No
24	25 9. Name and Address of Curren	29 29 Agent]30	Personal Property Tax due June 30. 10. Name and Address of New Register.	
	T CORPORATION SYSTEM		81 Name	192 varie and readings of their ringings.	
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			-	82 Street Address (P.O. Box Number is Not Acceptable)	
			62 Street Ad		
, ,	Attailor Le obbet		63		
			24 07		
			84 City	F	85 Zip Code
office or r agent. I a SIGNATURE				rporation submits this statement for the purpos- ation's board of directors. I hereby accept the a	
12.	Signature, typed or printed came of registered ages OFFICERS AND		TE: Registered Agent signature req	ured when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DCPT	DELETE	1.1 TITLE	Noomono (China Cara Cara Cara Cara Cara Cara Cara Ca	Change Addition
NAME	JOHNSON, DANIEL R		1.2 NAME		
STREET ADDRESS	9 RIVERSIDE OFFICE PARK		1.3 STREET ADDRESS		
CITY-S1-ZIP	WESTON MA 02193		1.4 CITY-ST-ZIP		
TITLE	DV	DELETE	2.1 TITLE		Change Addition
NAME	RICHARDS, STEVEN R		2.2 NAME		
STREET ADDRESS	9 RIVERSIDE OFFICE PARK		2.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP	WESTON MA 02183		2. 4 CITY - ST - ZIP		
TITLE	cco	DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME	BUTTERFIELD, BARBARA M		3 2 NAME		j
STREET ADDRESS	9 RIVERSIDE OFFICE PARK		3.3 STREET ADDRESS		†
CITY-ST-ZIP	WESTON MA 02193		3.4. CITY-ST-ZIP		
TITLE	CFO	☐ DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME	DEAN, BREIT W		4 2 NAME		
STREET ADDRESS	9 RIVERSIDE OFFICE PARK		43 STREET ADDRESS		
CITY-ST-ZIP	WESTON MA 02193	☐ DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE	COO KEMP, HILARY R	☐ DETER	5.1 TITLE		Change Addition
NAME OTOTET ADODESS	9 RIVERSIDE OFFICE PARK		5.2 NAME		
STREET ADDRESS	WESTON MA 02193		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	V	DELETE	5 4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME	STERN, HOWARD D	Em Ottelt	6.2 NAME		Change Addition
	9 RIVERSIDE OFFICE PARK				
STREET ADDRESS	WESTON MA 02193		6.3 STREET ADDRESS		
CITY-ST-ZIP		the thin films where not moved in	6.4 CITY-ST-ZIP	in Section 119.07(3)(i) Florida Statutes, Lifurthe	and the later ation

indicated on this annual report or supplied will this fling 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 suppliemental 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 coupletation of 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 B

4-15 48

181-833353