

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

FILED

Feb 10 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 # **F97000004827 (8)**
1. Corporation Name **FLIP, INCORPORATED, d/b/a**
THE ALAN H. FINEGOLD COMPANY



Principal Place of Business
~~XXXXXX XXXXXXXXXXXX~~
~~XXXXXX PA 1522 XXXXXXXX~~
273 N.E. Edgewater Drive
Stuart, FL 34996

Mailing Address
~~XXXXXX XXXXXXXXXXXX~~
~~XXXXXX PA 1522 XXXXXXXX~~
Six PPG Place, Suite 1150
Pittsburgh, PA 15222

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 273 N.E. Edgewater Drive Suite, Apt. #, etc 22 City & State 23 Stuart, FL 24 Zip 34996 25 Country Martin		2a. Mailing Address 26 Six PPG Place Suite, Apt. #, etc 27 Suite 1150 City & State 28 Pittsburgh, PA 29 Zip 15222 30 Country Allegheny		3. Date Incorporated or Qualified 09/16/1997	
		4. FEI Number 65-0769627 XXXXXX		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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No			

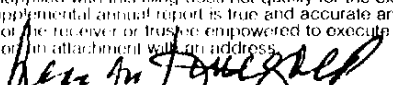
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

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 fee, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPT	1.1 TITLE	☐ Change ☐ Addition
NAME	FINEGOLD, ALAN H	1.2 NAME	
STREET ADDRESS	273 NE EDGEWATER DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	STUART FL 34996	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	FINEGOLD, ELIZABETH A	2.2 NAME	
STREET ADDRESS	XXXXXX XXXXXXXXXXXX 4940 Bayard Street	2.3 STREET ADDRESS	
CITY-ST-ZIP	XXXXXX PA 1522 XXXXXXXX Pittsburgh, PA 15222	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
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 in an attachment with an address.

SIGNATURE:  President 2/ 6/98 (412) 471-2548

CR2E034 (10/97)