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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 20 1998 8:00am Secretary of State

	1998 DIVISION OF CORPORATIONS					J -			
1	MENT # K3424 ON BUG #2090, INC.	3 (1))	841 81811 8 18	il Biell (88)		
Principal Place		Mailing Address				. 5.6.1 6.51. 6.			
13120 CORTEZ BLVD CORP. TAX DEPT. BROOKSVILLE FL 34613		450 WINKS LN CORPORATE TAX			DO NOT WRITE IN THIS SPACE				
		BENSALEM PA 19020							
U\$		US			3. Date Incorporated or Qualified 09/26/1988				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ar	oplied For	1
21		26			23-2517213	Not Applicable]
Sulte, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
23 Zip	Country	[28] Zip	Country		Trust Fund Contribution 8. This corporation owes or has pai				$\frac{1}{2}$
24	25	29	30		Personal Property Tax due June		_] No	
	9. Name and Address of Curre	<u> </u>	1251		10. Name and Address of New Re		ent		1
CT	CORPORATION SYSTEM	-	81	Name					İ
	00 SOUTH PINE ISLAND ROAD		82	Street Add	iress (P.O. Box Number is Not Acceptab	le)			1
PL/	ANTATION FL 33324		83						┦
			63						1
			84	City		FL	65 Zip	Code]
office or r agent. La	to the provisions of Sections 607.05 ogistered agent, or both, in the Stat ni familiar with, and accept the oblig	e of Florida. Such change was a	authorized by	the corporal	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of a t the appoi	hanging it ntment as	s registered registered	1
SIGNATURE	Signature typed or printed name of regionaled at	pent and 18c d applicable (NO)	F Registered Agr	rit signature requi	ired when reinstating)	DATE			
12.		VD DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC]8
TITLE	D BOOK DODDIT I					L	_ Change	Addition	CR2E034 (10/97
NAME	And bentalist a thomas		1.2 NAME	+DDDDCCC					8
STREET ADDRESS CITY-ST-ZIP	BENSALEM PA		1.3 STREET 1.4 CITY - S	Y					띯
TITLE	P P	DELETE	2.1 TITLE	11,511			Change	Addition	16
NAME	DORRITT, BERN		2.2 NAME			_	•		
STREET ADDRESS	450 WINKS LANE		2 3 S1REE1	ADDRESS					
CITY-ST-ZIP	BENSALEM PA 19020		2.4 City - 5	ST-ZIP					
TITLE	VTS	PEDELETE	3.1 TITLE		JON A., GOLDBERG		_ Change	Addition	
NAME	BRODSKY, BERNARD		3.2 NAME		VITIS				1
STREET ADDRESS	450 WINKS LANE Bensalem pa		3.3 STREET		SAMS				
CITY-ST-ZIP TITLE	V	DELETE	3.4. CITY-5	SI · ZR·	211112		Change	Addition	1
NAME	SPECTER, ERIC		4. 2 NAME			_	-		
STREET ADDRESS	450 WINKS LANE			ADDRESS					
CITY-ST-ZIP	BENSALEM PA 44		4.4 CHY-S	1 - 7IP			4]
TITLE		DELETE	5.1 TITLE			Ξ	Change	Addition Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	1					1
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-S 6.1 HILE	1 - 719			Change	Addition	1
NAME			6.2 NAME			L-	~ ~gu		
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP			64 CHY-S	1					
	ertify that the information supplied	with this filmu does not c ualify fo			Section 119.07(3)(i), Florida Statutes, I	further certi	y that the	information	1

Inerepty certify that the information supplied with this filling 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 is 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 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 Block 13 if changed, or on an attachment with an address.

JONA. GOLDBERG ADD 1 r 1990.

215-638-6741