## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 19, 2008 8:00 am Secretary of State

DOCUMENT # P00000027796  1. Entity Name ISAACSON, INC.					05-19-2008 90031 019 ***150.00				
Principal Place of Business Mailing Address									
,	T PLEASANT ROAD	1605 MOUNT PLEASANT ROAD				•			
VILLANOVA, PA 19085 VILLANOVA, PA 19085			,			•			
							85  3  4     15     15     15		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			05132008	Chg-P	CR2E034 (12/06)		
City & State		City & State			4. FEI Numb 65-101			oplied For ot Applicable	
Zip	Country	Zip Countr				of Status Desired	\$8.75 Add	ditional	
	6. Name and Address of Current			7. Name and	Address of New R	· ·	, <b>-</b>		
1. 2 loonests Touch top									
					iddress (P.O. Box Number is Not Acceptable)				
(Region od)					h Hay	<u> 5001~</u>	<del></del>		
Che Milady				SUPTO 1	101-03	<u> </u>	<b>□</b> Zin Cod	lo	
				Nap	les		FL   2549°	1102	
8. The above the obligat	named entity submits this statement for ions of registered agent.	or the purpose of changing its i	registered o	office or register	red agent, or bo	th, in the State of Flot) است	orida. I am familiar with,	and accept	
//de /// 1/2 - 1/20 Dearsh - 5/16/18									
SIGNATURE_	Signature, typed or of ited name of registered agent	and title it applicable. (NOTE	:: Registered Ag	jent signature required	d when reinstating)		DATE		
Due by September 12, 2008  9. Election Campaign F Trust Fund Contribut					.00 May Be led to Fees	In accordance w corporation did	vith s. 607.193(2)(b), not receive the prior	F.S., the notice.	
10.	OFFICERS AND		11.		ADDITIONS	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
TITLE	PD DI CHEIMED DAGBABA	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	DILSHEIMER, BARBARA 1605 MT PLEASANT ROAD		NAME STREET A	DDRESS					
CITY-ST-ZIP	VILLANOVA, PA 19085		CITY-ST-						
TITLE	D	☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS	•		NAME STREET A	DODECC					
CITY-ST-ZIP			CITY-ST-						
TITLE		☐ Delete	TITLE			·····	☐ Change	☐ Addition	
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET AS	ļ					
TITLE		□ Delete	TITLE				☐ Change	☐ Addition	
NAME			NAME						
STREET ADDRESS			STREET A	l					
CITY-ST-ZIP			CITY-ST-	- ZIP				- Law.	
TITLE NAME		☐ Delete	TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS			STREET A	NDORESS					
CITY-ST-ZIP			CITY-ST-	- ZIP					
THTLE		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET A	ADDRESS					
CITY-ST-ZIP			CITY-ST-						
12. I hereby	certify that the information supplied wit	h this filing does not qualify for	or the exemp	ptions contained	d in Chapter 11	9, Florida Statutes. I	further certify that the i	nformation	
indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									

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We have not included the late filing penalty associated with this return at this time. In 2008 we were informed that Wilmington Trust FSB had resigned as the Registered Agent. Additional time was needed in order to research and contract a new Registered Agent for this entity. I have tried on multiple occasions to contact the Division of Corporations at 1-850-245-6056 however due to heavy volume on the line was told to call back then was disconnected. Should you have any questions regarding the information provided please contact me directly at 215-940-7864.