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May 17, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *P12/98 Vok*

1. Corporation Name

Micro-Flo Company

Principal Place of Business 5925 Imperial Pkwy. Suite 130 Mulberry, FL 33860	Mailing Address 5925 Imperial Pkwy. Suite 130 Mulberry, FL 33860
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Hwy 41N, Route 1 Box 190 Suite, Apt. #, etc. 22 City & State 23 Sparks, GA 24 Zip 31647 25 Country		2a. Mailing Address 26 3000 Continental Drive-N Suite, Apt. #, etc. 27 City & State 28 Mount Olive, NJ 29 Zip 07828-1234 30 Country		3. Date Incorporated or Qualified 1/12/84 4. FEI Number 58-1547724 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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9. Name and Address of Current Registered Agent

Michael D. Allen
5925 Imperial Pkwy., Suite 130
Mulberry, FL 33860

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 Assistant Secretary April, 1999
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Formby, C.E. 5925 Imperial Pkwy # 130 Mulberry, FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	Chief Executive Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 530 Oak Drive, Suite 100 Memphis, TN 38117
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Allen, Michael D. 5925 Imperial Pkwy # 130 Mulberry, FL <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Thomas Y. Allman 3000 Continental Drive-N Mount Olive, NJ 07828-1234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Gonzalez, Gilbert 5925 Imperial Pkwy # 130 Mulberry, FL <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Mark A. Kerschner 3000 Continental Drive-N Mount Olive, NJ 07828-1234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	Assistant Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Philip E. Kaplan 3000 Continental Drive-N Mount Olive, NJ 07828-1234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE *Philip E. Kaplan* Philip E. Kaplan 4/21/99 (973) 426-3067
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

553532-92028-49
P12198

MICRO-FLO COMPANY
- OFFICERS

Title	Name	Business Address
Chief Executive Officer	Carlton E. Formby	P.O. Box 5948 Lakeland, FL 33807
Secretary	Thomas Y. Allman	3000 Continental Drive - North Mount Olive, NJ 07828-1234
Treasurer	Mark A. Kerschner	3000 Continental Drive - North Mount Olive, NJ 07828-1234
Asst. Secretary	Phillip E. Kaplan	3000 Continental Drive - North Mount Olive, NJ 07828-1234