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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P16144
1. Corporation Name
D.X.I. INCORPORATED

(8)

FILED Apr 29 1997 8:00am Secretary of State



Principal Place												
200 HIGHTOWE		Mailing Address 200 HiGHTOWER BOULEVARD										
PITTSBURGH PA 15205		PITTSBURGH PA 15205-1135				ţ						
US		US										
							 Date Incorporate 09/29/1987 	d or Qualified		e of Last Re 13/1996	eport	
2. Principal Pi	ace of Business	2a. Mailing Address					4. FEI Number			Ap	plied For	
21		26					25-1553703	<u> </u>			t Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.					5. Certificate of Sta	tus Desired		\$8.75		
22		27								Fee Re	<u> </u>	
City & State	9	City & State				6. Election Campai	•	r-n	\$5.00			
Zip	Country	Z _{ID} Country				Trust Fund Contr			Added t			
				B. This corporation has fiability for intangible tax under s. 199 Florida Statutes						199.032,		
24	25 29 30 30 9. Name and Address of Current Registered Agent				10, Name and Address of New Registered Agent							
C T CORPORATION SYSTEM					Nam	e				<u></u>		
	SOUTH PINE ISLAND ROAD	82 Street Ad				diam (D.O. Day Mysshar is Alat Assessible)						
	NTATION FL 33324				Stree	t Addres	ress (P.O. Box Number is Not Acceptable)					
				63				· · · · · · · · · · · · · · · · · · ·				
										T T 2		
				84	City				FL	85 Zip (Dode	
11. Pursuant l	les, the a	L⊥⊥ hov∈	-name	d corpor	ation submits this sta	tement for the p	urnose of	changing it	s registered			
office or re	egistered agent, or both, in the State or familiar with, and accept the obligation	of Florida, Such change was jone of Section 607,0505, El	authorize orida Sta	d by	the oc	rporation	n's board of directors	. I hereby accep	ot the appo	intment as	registered	
	m and accept the congar	11,0000,10000000,11	onou olu	10100	,							
SIGNATURE	Signature, typed or printed name of registered agent	ire required	when reinstating)		DATE							
12.	OFFICERS AND		13.				ADDITIONS/CHAI	NGES TO OFFIC				
TITLE	CCEO	☐ DELETE	1.1 7	11LF		1				Change	Addition	
NAME	RYAN, ROBERT M	000	1.2 N	AME								
STREET ADDRESS 200 HIGHTOWER BLVD SUITE 2		202	1.3 \$		ADDRESS							
CITY-ST-ZIP			1,4 CIT		T-7IP	<u> </u>					134.00	
TITLE	SVP	DELETE								Change	Addition	
NAME	BILTGEN, RENARD L 200 HIGHTOWER BLVD SUITE	202	2.2 N									
STREET ADDRESS	PITTSBURGH PA	202	23\$			3	SEE ATTAI			(450		
CITY-ST-ZIP	SVP	DELEXE			ST - ZIP			751 1 75			Addition	
TITLE	KARLOVICH, PETER J	☐ DELFTE	3.1 7							Change	☐ Madillori	
NAME	200 HIGHTOWER BLVD SUITE	202	3.2 N		IBB555							
STREET ADDRESS	PITTSBURGH PA	LVL			ADDRESS	·						
CITY-ST-ZIP TITLE	n n	DELETE	3.4. (4.1.7		ST-ZIP	+				Change	Addition	
NAME	KOVEN, GUSTAV	bittle		VAME					'		<u></u>	
] 1	997 LENOX DRIVE #3				ADDRESS	,						
STREET ADDRESS	LAWRENCEVILLE NJ			ity-S		<u> </u>						
CITY-ST-ZIP TITLE	D	DELETE	<u>4.4 C</u> 5 1 J		11 - 21	+				Change	Addition	
NAME	MINNO, DEREK		52 N							-		
STREET ADDRESS	290 USX TOWER, 600 GRANT	STREET			ADDRESS	,						
CITY-ST-ZIP	PITTSBURGH PA			ITY-S								
TITLE	D	DELETE	611							Change	Addition	
NAME	ADVANI, PRITAM M.			IAME								
STREET ADDRESS	200 HIGHTOWER BOULEVARD				ADDRES!	3						
CITY-ST-ZIP	PITTSBURGH PA		6.4 CITY-									
J111 J1 E11	L. <u> </u>											

I do 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 eath; 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.

3/11/02

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(effective January 1, 1997)

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