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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P22341

(2)

ARAMIS SERVICES INC.

Secretary of State

**FILED** 

Apr 11 1997 8:00am

125 PINEL	ace of Business AWN RD, NY, 11747	Mailing Address 125 PINELAWN RD. MELVILLE, NY, 11747-314	5	3. Date Incorporated or Qualified	3a. Date of Last Report
				12/23/1988	04/25/1996
2. Principa	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		13-3488721	Not Applicable
Տալը, Aլ 22	pt.#, elc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & S <b>23</b>	tale	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	tangible tax under s. 199.032,
24	25		30		Yes No
	<ol> <li>Name and Address of Current</li> <li>PRENTICE-HALL CORPORATION</li> </ol>		81 Name	10. Name and Address of New Reg	Istered Agent
	110 NORTH MAGNOLIA STREET FIRST FLORIDA BANK BUILDING TALLAHASSEE FL 32301  Int to the previsions of Sections 607.050 or registered agent, or both, in the State Lam familiar with, and accept the oblide.	02 and 607.1508, Florida Statute e of Florida, Such 607.0505, Florida Statute	83 84 City	orporation submits this statement for the puration's board of directors. I hereby accept	FL 85 Zip Code
SIGNATUR					
			F: Registered Agent signature rec	vired when reinstation)	DATE
12.			Registered Agent signature red		DATE ERS AND DIRECTORS IN 12
<b>12.</b> Till F	OFFICERS AN	ID DIRECTORS  DELETE	13.	oured when reinstating) ADDITIONS/CHANGES TO OFFICE	
	P NIELSEN, ROBERT	ID DIRECTORS	13.		ERS AND DIRECTORS IN 12
TITLE	P NIELSEN, ROBERT 125 PINELAWN RD.	ID DIRECTORS	13.		ERS AND DIRECTORS IN 12
TITLE NAME	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY	ID DIRECTORS	13. 1.3 TITLE 1.2 NAME		ERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRES	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY VP	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		ERS AND DIRECTORS IN 12
DITLE NAME STREET ADDRES CITY_ST-7-P	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY VP PAMELA BAXTER	ID DIRECTORS	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP		ERS AND DIRECTORS IN 12    Change
THEF NAME STREET ADORES CITY ST-ZP THEF	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY VP PAMELA BAXTER 125 PINELAWN ROAD	ID DIRECTORS	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12    Change
TITLE NAME STREET ADDRES GITY ST-78 TITLE MAMI	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY VP PAMELA BAXTER 125 PINELAWN ROAD MELVILLE N	DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		ERS AND DIRECTORS IN 12  Change Addition  Change Addition
THEF NAME STREET ADDRES CHY ST- Z/2 THEE NAME STREET ADDRES CHY-ST- ZIP	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY VP PAMELA BAXTER 125 PINELAWN ROAD MELVILLE N VS	ID DIRECTORS	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12    Change
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THE NAME STREEL ADDRES GITY ST. 7.09 THE NAME STREET ADDRES GITY-ST. 7.19 THE NAME STREET ADDRES GITY-ST. 7.19 THE	P NIELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY VP PAMELA BAXTER 125 PINELAWN ROAD MELVILLE N VS MAGRAM, SAUL H. 125 PINELAWN ROAD MELVILLE NY VS MAGRAM, SAUL H. 125 PINELAWN ROAD MELVILLE NY VT	DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition  Change Addition
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I have a secured and the annual report of 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 receive 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 ji charged or on an all accurate and decreas. JAMES PORRETTO

SIGNATURE: X

ASSISTANT SECRETARY YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR