

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P22341 (2)
1. Corporation Name
ARAMIS SERVICES INC.

Principal Place of Business
125 PINELAWN RD.
MELVILLE, NY. 11747

Mailing Address
125 PINELAWN RD.
MELVILLE, NY. 11747



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7 Corporate Center Dr. Suite, Apt. #, etc.		2a. Mailing Address 26 7 Corporate Center Dr. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/23/1988	
22 City & State 23 Melville, NY		27 City & State 28 Melville, NY		4. FEI Number 13-3488721	
24 Zip 11747		25 Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	

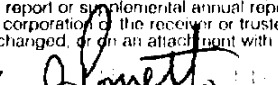
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET FIRST FLORIDA BANK BUILDING TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 _____ (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	P NELSEN, ROBERT 125 PINELAWN RD. MELVILLE NY	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Corporate Center Drive Melville, NY 11747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PAMELA BAXTER 125 PINELAWN ROAD MELVILLE N	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Corporate Center Drive Melville, NY 11747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MAGRAM, SAUL H. 125 PINELAWN ROAD MELVILLE NY	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Corporate Center Drive Melville, NY 11747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BIGLER, ROBERT J 125 PINELAWN ROAD MELVILLE NY	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Corporate Center Drive Melville, NY 11747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS RICHTER, GARY S. 125 PINELAWN ROAD MELVILLE KY	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Corporate Center Drive Melville, NY 11747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS PORRETTO, JAMES 125 PINELAWN ROAD MELVILLE KY	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Corporate Center Drive Melville, NY 11747

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 in an attachment with an address.

SIGNATURE: X  JAMES PORRETTO
ASSISTANT SECRETARY 4/28/98 516-847-6347

CR2E034 (10/97)