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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State DIVISION OF CORPORATIONS

1996

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INCA	rt institutes internatio	inal, inc.					
incipal Place	of Business	Mailing Address		1 EMOTOMBE CHA STRUCT INCHES (1801 II	8119 181 41811 81817 81811 81	PI 91911 91911 1887	
-,	00 SIXTH AVE.	C/O EMC 300 SIXTH	AVE.				
BTH FLOOR	1 DA 45333	8TH FLOOR PITTSBURGH PA 1522	12				
PITTSBURGH PA 15222 US		US		3. Date Incorporated or Qualified 02/27/1990		3a. Date of Last Report 04/12/1995	
Principal Pla	ce of Business	2a. Mailing Address		4. FEI Namber 25-1119571		Applied For	
uite, Apt. #	olo	26 Cuito Ast H ata		20-11195/1	60.7	Not Applicable	
ane, Apr. B	, U U.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	5 Additional Required	
ity & State		City & State		6. Election Campaign Financing		00 May Be	
		28		Trust Fund Contribution		ed to Fees	
p	Country	Ζιρ	Country	8. This corporation has liability for	r intangible tax under s	199.032,	
	25	29	30	_	s 🗷 No		
	9. Name and Address of Current R	egistered Agent	المرامق	10. Name and Address of New	Registered Agent		
T. IF	ENTINE HALL CORROTTON OF	TELL 11/0	81 Name				
	ENTICE-HALL CORPORATION SYS	STEM INC.	82 Street Ac	ddress (P.O. Box Number is Not Accepta	able)		
	AYS STREET		83				
SUITE 105			63				
TALLAHASSEE FL 32301			84 City		FL 85 7	γρ Code	
amiliar with IATURE	d agent, or both, in the State of Florida. 1, and accept the obligations of, Section Signature, typist or printed name of registers agent and	607.0505, Florida Statutes.		cration submits this statement for the popular of directors. I hereby accept the ap		d agent. I am	
	ogranie, typed or printed harne of registered ages t and OFFICERS AND D		If Projection (Agent's guature no.) 13.	-	DATE		
1	3	the contract of the contract of		ADDITIONS/CHANGES ID OF	FICERS AND DIRECT	ORS IN 12	
	STEINBERG, FREDERICK W	☐ DELETE	L 1 THE	ADDITIONS/CHANGES TO OF	FICERS AND DIRECT		
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A1 - Z11.		L] DELFIE	1.2 NAME	ADDITIONS/CHANGES TO OF	President and the second second second		
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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.

SIGNATURE:

' Gregory A. Weingart 3/28/96 (412)566-6000
Asst. Secretary Date (412)566-6000