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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Rusiness

INQUIRE WITHIN CORPORATION

(5)

Mailing Address

FILED Mar 31 1998 8:00am Secretary of State



815 WEST HIGHLAND AVENUE EBENSBURG PA 15931		maning madicas	Maning Madress				
		615 WEST HIGHLAND / EBENSBURG PA 15931	VENUE				
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
					04/25/1991		
2. Principal P	lace of Business	2a. Mailing Address			4. FEt Number		Applied For
21		26	26		NOT APPLICABLE		lot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee F	Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28	-+		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the cur		'
24	25	[29]	30				□ No
07	9, Name and Address of C	urrent Hegistered Agent	81		10. Name and Address of New Registered	Agent	
	CORPORATION SYSTEM		61	Name			
1200 S. PINE ISLAND ROAD			82	Street Add	Address (P.O. Box Number is Not Acceptable)		
PU	ANTATION FL 33324						
			83				
			84	City		85 Zip	Code
					FL	1 .	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Florida Statu State of Florida, Such change was	ites, the abov	e-named cor	poration submits this statement for the purpose of ation's board of directors. I hereby accept the app	changing	its registered
agent. I a	m familiar with, and accept the	obligations of, Section 607.0505, F	lorida Statute	s.	short's board of directors: Thereby accept the app	ommen a	s registered
SIGNATURE							
44	Signature, typed or printed number of register			ent signature requ	vired when reinstating) DATE		
12. TiTLE	PD	IS AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND		
NAME	KIMBALL, L. ROBERT		1.1 TITLE			Change	Addition
	OLE W. LINGUI AND AVE		1.2 NAME				
STREET ADDRESS	EDENGOLIDO DA		1.3 STREET				
CITY-ST-ZIP TITLE	VD	DELETE	14 CITY-5	ST-ZIP			
	KIMBALL, R. JEFFREY	C DECEST	21 TITLE			☐ Change	☐ Addition
NAME	615 W. HIGHLAND AVE.		2 2 NAME				
STREET ADDRESS	EBENSBURG PA	DA		ADDRESS	- •.		
City-St-ZIP	TD	- Druste	2. 4 CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE	L. ROBERT KIMBALL	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	615 W. HIGHLAND AVE.		3.2 NAME				
STREET ADDRESS	EBENSBURG PA		3.3 STREET				
CITY-ST-ZIP	SD SD		3.4. CITY -	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			L Change	☐ Addition
NAME	MYERS, G. WILLIAM, JR. 615 W. HIGHLAND AVE.		4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY - ST - ZIP	EBENSBURG PA		4.4 CITY - S	T- ZIP			
TITLE		DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T - ZIP			
TITLE		DELETE	6.1 TATLE			Change	Addition
NAME			6.2 NAME				ŀ
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S	T-ZIP			

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 suppliemental 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 trusted 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.