

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P34217 1. Corporation Name ALLTECH OPERATIONS INC.	(0)
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**APPROVED
AND
FILED**

1995 MAY 16 PM 2:07
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business 475 SPRING PARK PLACE HERNDON VA 22070	Mailing Address ONE PENN PLAZA 2ND FLOOR NEW YORK NY 10119 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 One Penn Plaza Suite, Apt. #, etc. 27 Att. K. Curran City & State 28 New York, NY Zip 29 10119 Country 30
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3. Date Incorporated or Qualified 06/06/1991	3a. Date of Last Report 04/27/1994
4. FEI Number 54-1499986	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 officer 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 _____ DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PC
NAME	NOAKES, R.C.
STREET ADDRESS	475 SPRING PARK PLACE
CITY, ST, ZIP	HERNDON VA
TITLE	P
NAME	BROOKS, M.C.
STREET ADDRESS	475 SPRING PARK PLACE
CITY, ST, ZIP	HERNDON VA
TITLE	D
NAME	BALLOWE, G.H.
STREET ADDRESS	475 SPRING PARK PLACE
CITY, ST, ZIP	HERNDON VA
TITLE	V
NAME	RISHER, J. S.
STREET ADDRESS	475 SPRING PARK PLACE
CITY, ST, ZIP	HERNDON VA
TITLE	AS
NAME	CURRAN, K.J.
STREET ADDRESS	250 W. 34TH STREET
CITY, ST, ZIP	NEW YORK NY
TITLE	S
NAME	SNOWDEN, G.M.
STREET ADDRESS	475 SPRING PARK PLACE
CITY, ST, ZIP	HERNDON VA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ Change ☐ Addition
2. NAME	700001494367
3. STREET ADDRESS	-05/19/95--01031--014
4. CITY, ST, ZIP	****467.50 ****233.75
21. TITLE	☐ Change ☒ Addition
22. NAME	P
23. STREET ADDRESS	Wilson, J.A.
24. CITY, ST, ZIP	475 Spring Park Place Herndon, VA 22070
31. TITLE	☐ Change ☒ Addition
32. NAME	Prieto, R
33. STREET ADDRESS	One Penn Plaza
34. CITY, ST, ZIP	New York, NY 10119
41. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY, ST, ZIP	
51. TITLE	☒ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	One Penn Plaza
54. CITY, ST, ZIP	New York, NY 10119
61. TITLE	☐ Change ☐ Addition
62. NAME	20A
63. STREET ADDRESS	5-18-95
64. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.02(3)(b), 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. I am an officer or director of the corporation or its predecessor 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 in the annual report with an address.

SIGNATURE: <i>Kevin J. Curran</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Assistant Secretary Kevin J. Curran Date: / /95 (212) 465-5011
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