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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P92000008474 (8)

STONES, INC.

CITY-ST-ZIP

STREET ADDRESS

10 Ros

NAME

SS PENNSTLVANA AVENUE SUITE 13 2. Principal Pisco of Business 2. Melling Address 2. Melling Address 2. Melling Address 3. Date incorporated or Qualified 12/02/1992 4. FEI Number 23/208361 Nov Applied For 23/208361 Nov Applied For 3. Clay & Statio City & Statio Tip Country 8. This corporation or or one or in his paid the current year imagistered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 120 I HAY'S STREET SUITE 105 TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607 0502 and 607 1568. Floridd Statunes, the above-named corporation's board of directors. I hereby accept the experiment as registered spent of the minimal with, and nearly the considerance of Sections (Control of Statunes) and the current spent imagister properties of Sections (Control of Statunes) and the current spent imagister properties of Sections (Control of Statunes) 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections (Control of Statunes) 12. OF I STATE AGENCS (P.O. Box Number is Not Acceptable) 13. Name 14. City Station 15. Name 16. Clity 16. Clity 17. Pursuant to the provisions of Sections (Control of Stations) 18. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections (Control of Stations) 18. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections (Control of Stations) 12. OF FLEFS AND INTROCOORS 13. Stations (P.O. Box Number is registered of Box Number is Not Acceptable) 14. Clity F. Fl. Street Address (P.O. Box Number is Not Acceptable) 17. Washington P.A. Street Address (P.O. Box Number is Not Acceptable) 18. Clity F. Fl. Street Address (P.O. Box Number is Not Acceptable) 19. Charge P. Pursuant is the purpose of changing at registered of Box Number is Not Acceptable) 19. Charge P. Pursuant is the	455 PENNSYLVANIA AVENUE SUITE 135 FORT WASHINGTON PA 18034 2. Principal Place of Business 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 29 29 20 20 20 20 10 Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Floride Statutes, the above-named corporations agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes SIGNATURE Signature, byeder pented received any state talled speketallic (ICEL Registered Agent accept the obligations of, Section 607,0505, Florida Statutes agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes Signature 12. OFFICERS AND DIRECTORS Signature byeded agent, or both in the State and their speketallic (ICEL Registered Agent signature agent as a state of the component of the component and the component agent accept the obligations of, Section 607,0505, Florida Statutes Signature 12. OFFICERS AND DIRECTORS Signature byeded agent, or both in the State and their speketallic (ICEL Registered Agent signature agent and the component agent agent agent and the component agent	
SURE 135 FORT WASHINGTON PA 1803 2. Principal Place of Business 2. Mile April 9, etc. 2. Principal Place of Business 2. Mile April 9, etc. 2. Suite,	SUITE 135 FORT WASHINGTON PA 19034 2. Principal Place of Business 21 26 Suite, Apt. #, etc. 22 27 City & State 28 Zip	s remirem rum round siers moist opkit opkit deste deste deste seut rent rent redit diet telt
### DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 2a. Maining Address 4. FEI Number Applied For 3. Date Incorposated or Qualified 12/02/1992	2. Principal Place of Business 2a. Mailing Address 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 City & State 28 City & State 28 City & State 29 30 Suite, Apt. #, etc. 27 City & State 28 City & State 29 30 Suite, Apt. #, etc. 27 City & State 28 City & State 29 30 Suite, Apt. #, etc. 27 City & State 28 City & State 28 City & State 29 30 Suite, Apt. #, etc. 27 Country 29 Suite, Apt. #, etc. 27 Country 20 Suite, Apt. #, etc. 28 Suite, Ap	
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Let Incumber 3. 27003581 3. Not Applied For 3. Suite, Apt. #, etc. 2. City & State 3. Country 3. The Country 3. The Personal Property Tax due June 10. Name and Address of Current Registered Agent 3. Name and Address of Name Registered Agent 3. Name and Address of Name Registered Agent 4. City STREET 5. SUITE 10. 5. Suite Agent In Street Address (P.O. Box Number is Not Acceptable) 5. Suite Address (P.O. Bo	2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 2. City & State 2. Suite, Apt. #, etc. 3. Suite, Apt. #, e	DO MONIMORE IN THE OFFICE
2. Principal Place of Business 2e, Multing Address 4. FEL Immber Applied For 23-2708361 Not Applicable Suite, Apt #, etc. 25 Not Applicable Suite, Apt #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required	2. Principal Place of Business 2e. Mailing Address Suite, Apt. #, etc. 22 27 City & State 23 Zip Country Zip	
2. Principal Place of Businoss 2. Mailury Address 2. Mailury Address 2. A. FEL Number Applicat for 2 Applicat for 2 Applications Appl	Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State Country Zip Zip Zip Zip Zonand Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 83 City & State 28 Zip Country Zip Country Zip Country Zip Zip Country Zip Country Zip Country Zip Zip Country Zip Country Zip Zip Zip Zip Country Zip Zip Zip Zip Zip Zip Zip Zi	•
Suite, Apt. #, etc. Suite, Ap	Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State Country Zip Zip Zip Zip Zonand Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 83 City & State 28 Zip Country Zip Country Zip Country Zip Zip Country Zip Country Zip Country Zip Zip Country Zip Country Zip Zip Zip Zip Country Zip Zip Zip Zip Zip Zip Zip Zi	
Suite, Apt. #, etc. Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite, Apt. #, etc.	/ ppilod i or
City & State The Personal Property Tax due June 30.	City & State City & State 28	
City & State City & State City & State Country 28 28 28 29 30 30 29 30 30 30 30 30 30 30 3	Zip Country Zip Country Zip Country 28	
28	Zip Country Zip Co	· · · · · · · · · · · · · · · · · · ·
Zip Country Zip Country Zip Country Zip Country St. This corporation owes or has paid the current year Intengible Personal Property Tax due June 20 Yes No No Yes No Yes No Yes No Yes No Yes No Yes	24 29 29 30 P. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, by set or protect agent and title d'applicable. (NOT) Registered Agent signature required with the LiNN, JEFFREY A. 12. OFFICE HIS AND DIRICTORS 13. TITLE D LINN, JEFFREY A. 1.2 NAME LINN, JEFFREY A. 1.2 NAME LINN, JEFFREY A. 1.3 STREET ADDRESS 455 PENNSYLVNIA AVE. 135 CITY-ST-ZIP TITLE D ROGERS, ROBERT G STREET ADDRESS 445 PENNSYLVANIA AVE. FORT WASHINGTON PA 1.4 CITY-S1-ZIP TITLE D NAME MASSIMINI, DANTE J NAME MASSIMINI, DANTE J NAME MASSIMINI, DANTE J STREET ADDRESS 445 PENNSYLVANIA AVE. 1.3 STREET ADDRESS 445 PENNSYLVANIA AVE. 1.3 STREET ADDRESS 445 PENNSYLVANIA AVE. 1.4 CITY-S1-ZIP 1.5 TITLE D NAME MASSIMINI, DANTE J NAME MASSIMINI, DANTE J 1.4 CITY-S1-ZIP 1.5 TITLE D NAME MASSIMINI, DANTE J 1.5 TITLE D LIDELTE 1.5 TITLE 1.6 TITLE 1.7 TITLE 1.7 TITLE 1.7 TITLE D NAME MASSIMINI, DANTE J 1.8 TITLE 1.9 TITLE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 1.5 TITLE	, o
25 29 30 Personal Property Tax due June 30. Yes No	9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, type-doi junited name of rep-decedage of and title of spotscale. 12. OFFICE HS AND DIRECTORS 13. TITLE D LINN, JEFFREY A. 12. NAME LINN, JEFFREY A. 13. STREET ADDRESS 13. STREET ADDRESS 145 PENNSYLVNIA AVE 135 STREET ADDRESS 455 PENNSYLVNIA AVE 135 TITLE D MAME ROGERS, ROBERT G 445 PENNSYLVANIA AVE. CITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 1.1 TITLE D DELETE 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 445 PENNSYLVANIA AVE. CITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 3.1 TITLE NAME MASSIMINI, DANTE J 3.2 NAME STREET ADDRESS 445 PENNSYLVANIA AVE. 3.3 STREET ADDRESS GITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 3.1 TITLE AMME MASSIMINI, DANTE J 3.2 NAME 3.3 STREET ADDRESS GITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 3.1 TITLE AMME MASSIMINI, DANTE J 3.2 NAME 3.3 STREET ADDRESS GITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 4.1 TITLE AMME AMAGE ASSIMINI, DANTE J 3.2 NAME 3.3 STREET ADDRESS GITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 4.1 TITLE AMME AMAGE AND DELETE 4.1 TITLE AMME AMAGE ASSIMINI, DANTE J 3.2 NAME 3.3 STREET ADDRESS GITY-ST-ZIP TITLE D DELETE 4.1 TITLE AMME AMAGE AND DELETE 4.1 TITLE AMME AMAGE AND DELETE 4.1 TITLE AMME AMAGE AND DELETE 4.1 TITLE AMME AMAGE AMAGE AND DELETE 4.1 TITLE AMME 4.2 NAME	
10. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutos. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Horida Statutos SIGNATURE Signature Transport of the provisions of Sections 607 0502 and 607 1508. Florida Statutos SIGNATURE Signature Transport of the provisions of Sections 607 0502 and 607 1508. Florida Statutos SIGNATURE Signature Transport of the provisions of Sections 607 0505. Horida Statutos SIGNATURE Signature Transport of the provisions of Sections 607 0505. Horida Statutos SIGNATURE Signature Transport of the provisions of Sections 607 0505. Horida Statutos Signature Transport of the provisions of Sections 607 0505. Horida Statutos Signature Transport of the provisions of Sections 607 0505. Horida Statutos Signature Transport of the provisions of Sections 607 0505. Horida Statutos Signature Transport of the provisions of Sections 607 0505. Horida Statutos Signature Transport of Corporation Submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Sections 607 0505. Horida Statutos Signature Transport of Corporation Submits this statement for the purpose of changing its registered agent. I all the Section of Corporation Submits this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered agent. I all the Section Se	### STREET ADDRESS ### STREET G ### PENNSYLVANIA AVE #135 STREET ADDRESS ### PENNSYLVANIA AVE #### PENNSYLVANIA AVE #### PENNSYLVANIA AVE #### PENNSYLVANIA AVE ##### PENNSYLVANIA AVE ##################################	
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 83 64 City FL 85 Zip Code 11. Pureuant to the provisions of Sections 607 050° 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 Statutes 11. Pureuant to the provisions of Sections 607 050° and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes SIGNATURE Signature Technology of the Florida Statutes of the statute	THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes SIGNATURE Signature, bywell or panied mane of regulated agent and title of optiocable. 12. OFFICERS AND DIRE CTORS 13. TITLE D LINN, JEFFREY A. 1.2 NAME LINN, JEFFREY A. 1.3 STREET ADDRESS 455 PENNSYLVNIA AVE #135 CITY-ST-ZIP FT. WASHINGTON PA 1.4 CITY-ST-ZIP TITLE D MAME ROGERS, ROBERT G 445 PENNSYLVANIA AVE. STREET ADDRESS 445 PENNSYLVANIA AVE. FORT WASHINGTON PA 12. TITLE D MAME MASSIMINI, DANTE J TITLE D MAME MASSIMINI, DANTE J TITLE D LITTLE L	
11. Pursuant to the provisions of Sections 607 0509 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or british in the State of Exists. State change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and the displacement of Section 607 0505, Florida Statutes. 11. Pursuant to the provisions of Section 607 0509 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and the displacement of Section 607 0505, Florida Statutes. 12. OFFICE RS AND DIRE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. TITLE 15. DELETE 15. TITLE 15. TI	1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607.050? and 607.1508. Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICE RS AND DIRL CTORS 113. TITLE NAME LINN, JEFFREY A. 1.2 NAME LINN, JEFFREY A. 1.2 NAME LINN, JEFFREY A. 1.3 STREET ADDRESS OITY-ST-ZIP FT. WASHINGTON PA 1.4 CITY-SI-ZIP TITLE NAME ROGERS, ROBERT G 22 NAME STREET ADDRESS CITY-ST-ZIP TITLE D MASSIMINI, DANTE J TITLE D MASSIMINI, DANTE J STREET ADDRESS GITY-ST-ZIP TITLE MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 1.4 CITY-ST-ZIP TITLE D DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D MASSIMINI, DANTE J TITLE D MASSIMINI, DANTE J TITLE D DELETE 4.1 TITLE AMME MASSIMINI, DANTE J TITLE D DELETE 4.1 TITLE AMME MASSIMINI, DANTE J TITLE D DELETE 4.1 TITLE AMME MASSIMINI, DANTE J TITLE D DELETE 4.1 TITLE AMME MELLER, JONATHAN B.	A seems and variable of New Undistrict Whatir
SUITE 105 TALLAHASSEE FL 32301 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0500 and 607 1509. Fiorida Statutes, the comporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505. Florida Statutes SIGNATURE Signature	SUITE 105 TALLAHASSEE FL 32301 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, type for period name of registered agend and title of applicability. 12. OFFICERS AND DIRECTORS 13. TITLE D LINN, JEFFREY A. 12. NAME LINN, JEFFREY A. 12. NAME LINN, JEFFREY A. 13. STREET ADDRESS CITY-ST-ZIP FT. WASHINGTON PA 14. CITY-ST-ZIP TITLE D ROGERS, ROBERT G 22. NAME 23. STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 21. TITLE D LINLE D DELETE 21. TITLE D AMME ROGERS, ROBERT G 22. NAME 23. STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 31. TITLE 32. NAME 33. STREET ADDRESS CITY-ST-ZIP TITLE D LINLE	
TALLAHASSEE FL 32301 84	TALLAHASSEE FL 32301 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes SIGNATURE Signature, typed or period name of regodered agent and title of applicability. OFFICERS AND DIRECTORS 13. TITLE D LINN, JEFFREY A. 1.2 NAME LINN, JEFFREY A. 1.2 NAME STREET ADDRESS CITY-ST-ZIP FT. WASHINGTON PA 1.4 CITY-ST-ZIP TITLE D AME ROGERS, ROBERT G 22 NAME 21 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 2.1 TITLE D LINE AME ACITY-ST-ZIP TITLE D DELETE 3.1 TITLE D LINLE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D MASSIMINI, DANTE J AME MASSIMINI, DANTE J 445 PENNSYLVANIA AVE. 33. STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 1.4 CITY-ST-ZIP TITLE D DELETE 3.1 TITLE AME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 TITLE AMME WELLER, JONATHAN B.	(P.O. Box Number is Not Acceptable)
### City FL 85 Zip Code 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 agent. I am familiar with, and accept the obligations of, Section 607,0505. Florida Statutes Signature	11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes SIGNATURE Signature, type of or posted name of registered agent and the objection 607.0505. Florida Statutes 12. OFFICERS AND DIRE CTORS 13. TITLE D LINN, JEFFREY A. 455 PENNSYLVNIA AVE #135 STREET ADDRESS CITY-ST-ZIP FT. WASHINGTON PA 1.4 CITY-SI-ZIP TITLE D AMME ROGERS, ROBERT G 22 NAME 23 STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA DELETE 1.1 TITLE D CLINAL 22 NAME 23 STREET ADDRESS CITY-ST-ZIP TITLE D MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP TITLE D AMSE MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 1.4 CITY-ST-ZIP TITLE D CLITTE D CLITTE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP TITLE D CLITT-ST-ZIP TITLE	
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 agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes SIGNATURE Signature: by bear of pended name of top-level may at and the disposability. (ACDI. Registered Agent Signature required when reinstaining.) DATE.	11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes SIGNATURE Signature, type-decept the obligations of, Section 607.0505. Florida Statutes Signature	
11. Pursuant to the provisions of Sections 607 0509 and 607 1508. Florida Statures, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Lorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes SIGNATURE Signature, type to pended three of the deligations of, Section 607,0505, Florida Statutes SIGNATURE Signature, type to pended three of type levels agent and the degree of the obligations of, Section 607,0505, Florida Statutes 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICERS AND DIRECTORS IN 12 12. TITLE DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY ST 2P FT. WASHINGTON PA 14. CITY ST 2P FT. WASHINGTON PA 14. CITY ST 2P TITLE DELETE 21. TITLE DELETE 22. NAME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY ST 2P FT. WASHINGTON PA 14. CITY ST 2P TITLE DELETE 21. TITLE DELETE 22. NAME 33. STREET ADDRESS 445 PENNSYLVANIA AVE. 33. STREET ADDRESS FORT WASHINGTON PA 34. CITY ST 2P TITLE DELETE DELETE 33. TITLE DELETE 33. STREET ADDRESS 445 PENNSYLVANIA AVE. 34. CITY ST 2P TITLE DELETE 15. Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Change Change Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Ch	SIGNATURE Signature, types for pented name of represent age not and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent	85 Zip Code
SIGNATURE Signature, type-for product function to preferred agent and title of applicability. Change Cha	SIGNATURE Signature, types for pented name of represent age not and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent	F <u>L</u> `
SIGNATURE Signature, type-for profect function for polescalage at and Meritapolacable (NOT) Registered Agent signature required when reinstating) DATE	SIGNATURE Signature, types for pented name of represent age not and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent and telest appeloachtic. (NOTE Registered Agent signature required with the standard pented agent	flon submits this statement for the purpose of changing its registered s board of directors. I hereby accept the appointment as registered
Signature, by red or pented furneed regulated turneed regulated when reinstaining) DATE	Signature, by each or pointed turnered applied and their applicated. (NOT) Registered Agent signature required with the property of the	
TITLE D DELETE 1.1 TITLE CONSTRUCTION OFFICER Change Staddition NAME LINN, JEFFREY A. STREET ADDRESS 455 PENNSYLVNIA AVE \$135 TITLE D DELETE 2.1 TITLE NAME ROGERS, ROBERT G STREET ADDRESS 445 PENNSYLVANIA AVE. CITY-ST-ZIP FORT WASHINGTON PA TITLE D DELETE 3.1 TITLE NAME MASSIMINI, DANTE J STREET ADDRESS 445 PENNSYLVANIA AVE. STREET ADDRESS 455 PENNSYVANIA AVE \$135	TITLE NAME LINN, JEFFREY A. STREET ADDRESS 455 PENNSYLVNIA AVE #135 CITY-ST-ZIP TITLE NAME ROGERS, ROBERT G STREET ADDRESS 445 PENNSYLVANIA AVE. CITY-ST-ZIP TITLE NAME MASSIMINI, DANTE J STREET ADDRESS 445 PENNSYLVANIA AVE. CITY-ST-ZIP TITLE NAME MASSIMINI, DANTE J STREET ADDRESS 445 PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP TITLE NAME MASSIMINI, DANTE J STREET ADDRESS 445 PENNSYLVANIA AVE. STREET ADDRESS AL CITY-ST-ZIP TITLE DELETE AL TITLE AL TITLE AL TITLE AL Z NAME 4.2 NAME	- · ·
NAME STREET ADDRESS LINN, JEFFREY A. \$12 NAME \$13 STREET ADDRESS LTY-ST-ZIP TITLE D DELETE DELETE 21 TITLE D TITLE D TOTILE TOT	NAME STREET ADDRESS CITY-ST-ZIP FT. WASHINGTON PA TITLE NAME ROGERS, ROBERT G STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE DELETE A45 PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE DELETE A46 TITLE DELETE A47 TITLE DELETE A47 TITLE A47 TITLE A48 T	
STREET ADDRESS FT. WASHINGTON PA TITLE D ROGERS, ROBERT G STREET ADDRESS CITY-ST-ZIP TITLE D CHANGE STREET ADDRESS CITY-ST-ZIP TITLE D CHANGE CITY-ST-ZIP TITLE D CHANGE Addition AMA MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP TITLE D CHANGE Addition Addition Addition AMA STREET ADDRESS CITY-ST-ZIP TITLE D CHANGE Addition	STREET ADDRESS OITY-ST-ZIP FT. WASHINGTON PA TITLE NAME ROGERS, ROBERT G STREET ADDRESS OITY-ST-ZIP FORT WASHINGTON PA TITLE DELETE 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS OITY-ST-ZIP FORT WASHINGTON PA TITLE DELETE ASSIMINI, DANTE J STREET ADDRESS OITY-ST-ZIP FORT WASHINGTON PA TITLE DAME MASSIMINI, DANTE J STREET ADDRESS OITY-ST-ZIP FORT WASHINGTON PA TITLE DELETE 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME WELLER, JONATHAN B.	
TITLE DELETE 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE DELETE 3.2 NAME MASSIMINI, DANTE J STREET ADDRESS 445 PENNSYLVANIA AVE. TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE DELETE 4.1 TITLE DELETE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS	TITLE DELETE 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE 2.2 NAME 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE DELETE 3.2 NAME 3.2 NAME STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.4 TITLE NAME WELLER, JONATHAN B.	ria eligimen
TITLE D DELETE 1.4 CITY-ST-ZIP TITLE D ROGERS, ROBERT G \$2 NAME \$3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 1.4 CITY-ST-ZIP FORT WASHINGTON PA 2.4 CITY-ST-ZIP TITLE D MASSIMINI, DANTE J \$3.2 NAME \$3.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 3.4 CITY-ST-ZIP TITLE D Change Addition Addition Addition Addition DELETE 1.4 CITY-ST-ZIP TITLE D Change Addition	TITLE DELETE 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE 2.2 NAME 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE DELETE 3.2 NAME 3.2 NAME STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.4 TITLE NAME WELLER, JONATHAN B.	Pennsylvania AUC
TITLE NAME ROGERS, ROBERT G \$TREET ADDRESS CITY-ST-ZIP TOTILE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 13.3 STREET ADDRESS CITY-ST-ZIP TITLE D Change Addition Addition Change Addition Addition Addition DELETE 1.1 TITLE D Change Addition Addition Change Addition Addition Addition Change Addition Addition Change Addition	TITLE MAME ROGERS, ROBERT G STREET ADDRESS CITY-ST-ZIP TITLE NAME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 3.4 CITY-ST-ZIP TITLE DELETE 3.4 CITY-ST-ZIP AME MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 1.4 TITLE MAME WELLER, JONATHAN B.	Dashinatan Pa 19034
STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 2 3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 31 INTLE 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 INTLE D Change Addition Addition DELETE 4.1 INTLE D Change Addition Addition L Change Addition	STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE MASSIMINI, DANTE J STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA DELETE 31 TITLE MASSIMINI, DANTE J 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA TITLE DELETE 4.1 TITLE NAME WELLER, JONATHAN B. 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME	
CITY-ST-ZIP FORT WASHINGTON PA 2 4 CITY-ST-ZIP TITLE NAME MASSIMINI, DANTE J 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 3.1 ITILE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 ITILE WELLER, JONATHAN B. STREET ADDRESS 4.3 STREET ADDRESS	CITY-ST-ZIP FORT WASHINGTON PA 2 4 CITY-ST-ZIP TITLE NAME MASSIMINI, DANTE J 3.2 NAME 3.2 NAME 445 PENNSYLVANIA AVE. CITY-ST-ZIP FORT WASHINGTON PA TITLE D L DELETE DELETE 4.1 TITLE NAME WELLER, JONATHAN B. 4.2 NAME	
TITLE D DELETE 31 TITLE	TITLE DELETE 3 1 TITLE NAME MASSIMINI, DANTE J 3.2 NAME STREET ADDRESS 445 PENNSYLVANIA AVE. 3.3 STREET ADDRESS CITY-ST-2IP FORT WASHINGTON PA 3.4. CITY-ST-ZIP TITLE D DELETE 4.1 TITLE NAME WELLER, JONATHAN B. 4.2 NAME	
TITLE D DELETE 31 I/ILE Change Addition NAME MASSIMINI, DANTE J 32 NAME STREET ADDRESS 445 PENNSYLVANIA AVE. 3.3 STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA 3.4 CITY-ST-ZIP TITLE D DELETE 41 TITLE D Change Addition NAME WELLER, JONATHAN B. 4.2 NAME STREET ADDRESS 4.55 PENNSYVANIA AVE #135 4.3 STREET ADDRESS	TITLE D DELETE 3.1 TITLE NAME MASSIMINI, DANTE J 3.2 NAME STREET ADDRESS 445 PENNSYLVANIA AVE. CITY-ST-ZIP FORT WASHINGTON PA 3.4 CITY-ST-ZIP TITLE D DELETE 4.1 TITLE NAME WELLER, JONATHAN B. 4.2 NAME	
STREET ADDRESS 445 PENNSYLVANIA AVE. FORT WASHINGTON PA 11TILE DELETE 4.1 TITLE WELLER, JONATHAN B. STREET ADDRESS 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA ITILE D WELLER, JONATHAN B. 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	Change Additio
STREET ADDRESS 445 PENNSYLVANIA AVE. FORT WASHINGTON PA 11TILE DELETE 4.1 TITLE WELLER, JONATHAN B. STREET ADDRESS 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP FORT WASHINGTON PA ITILE D WELLER, JONATHAN B. 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	
CITY-ST-ZIP FORT WASHINGTON PA 3.4. CITY-ST-ZIP TITLE D Change Addition Addition WELLER, JONATHAN B. STREET ADDRESS 4.5 PENNSYVANIA AVE #135 4.3 STREET ADDRESS	CITY-ST-ZIP FORT WASHINGTON PA TITLE D WELLER, JONATHAN B. 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	
TITLE D DELETE 4.1 TITLE DChange Addition NAME WELLER, JONATHAN B. STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS	TITLE D LDELETE 4.1 TITLE NAME WELLER, JONATHAN B. 4.2 NAME 4.2 NAME	
NAME WELLER, JONATHAN B. 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS	ARE DESIGNOUS AND MADE	Change Additio
STREET ADDRESS 455 PENNSYVANIA AVE #135 4.3 STREET ADDRESS 4.3 STREET ADDRESS	ARE DESIGNOUS AND MADE	
	OFFICE PROPERTY IN THE PROPERTY OF THE PROPERT	المدارية ال المدارية المدارية ا
CITY-ST-ZIP FT. WASHINGTON PA 4.4 CITY-ST-ZIP	ST MACHINOTON DA	·
· · · · · · · · · · · · · · · · · · ·		Channe 1 Addition
	NAME 52 NAME	El Comingo El Madillo
NAME : 1 52 NAME	STREET ADDRESS 5.3 STREET ADDRESS	

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 on an attachment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

61 TITLE

6.2 NAME

DELETE

Janlas

and the contract

Addition

FILED

May 12 1998 8:00am

Secretary of State

1 (**30):00**: 710 (6:17 (7:4) 96:11 96:11 66:11 66:11 66:11 66:11 10:11 6:01 (6:01)