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CORPORATION ANNUAL REPORT 1995

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:57

DOCUMENT # P93000018692 (2)

1. Corporation Name

ALLIED/WATER STREET, INC.

Principal Place of Business	Mailing Address
925 HARVEST DR STE 210 BLUE BELL PA 19422 US	% E S URDANG REAL ESTATE 925 HARVEST DR. STE 210 BLUE BELL PA 19422 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 Urdang & Assoc. Real Estate	2a. Mailing Address: 26 630 W.Germantown Pike
Suite, Apt. #, etc.: 22 Suite 321	Suite, Apt. #, etc.: 27 Suite 321
City & State: 23 Plymouth Meeting, PA	City & State: 28 Plymouth Meeting, PA
Zip: 24 19462 Country: 25 USA	Zip: 29 19462 Country: 30 USA

3. Date Incorporated or Qualified: 03/11/1993
3a. Date of Last Report: 02/10/1994
4. FEI Number: 23-2721464 — 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. The corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

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

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	TITLE	D/P ☒ Change ☐ Addition
NAME	URDANG, E S	NAME	E.S. Urdang
STREET ADDRESS	925 HARVEST DR SUITE 210	STREET ADDRESS	630 W. Germantown Pike, Suite 321
CITY-ST-ZIP	BLUE BELL PA	CITY-ST-ZIP	Plymouth Meeting, PA 19462
TITLE	VS	TITLE	V/S ☒ Change ☐ Addition
NAME	BLUM, DAVID J	NAME	David J. Blum
STREET ADDRESS	925 HARVEST DR, STE 210	STREET ADDRESS	630 W.Germantown Pike, Suite 321
CITY-ST-ZIP	BLUE BELL PA	CITY-ST-ZIP	Plymouth Meeting, PA 19462
TITLE	V	TITLE	V ☒ Change ☐ Addition
NAME	NOVICK, STEVEN C	NAME	Steven C. Novick
STREET ADDRESS	925 HARVEST DR, STE 210	STREET ADDRESS	630 W. Germantown Pike, Suite 321
CITY-ST-ZIP	BLUE BELL PA	CITY-ST-ZIP	Plymouth Meeting, PA 19462
TITLE	V	TITLE	V ☒ Change ☐ Addition
NAME	SANFILIPPO, VINCENT	NAME	Vincent Sanfilippo
STREET ADDRESS	925 HARVEST DR, STE 210	STREET ADDRESS	630 W. Germantown Pike, Suite 321
CITY-ST-ZIP	BLUE BELL PA	CITY-ST-ZIP	~~Plymouth Meeting, PA 19462~~
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 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.

SIGNATURE: Allied Water Street Inc — V.P

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven Novick

4/24/95 Date

610-834-9500 Daytime Phone

0002208 CP