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Apr 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000067910 (8)
1. Corporation Name
TANTAMOUNT TOWERS CORPORATION FLORIDA



Principal Place of Business
347 MONTGOMERY AVE.
BALA CYNWOOD PA 19004

Mailing Address
P.O. BOX 776
BALA CYNWYD PA 19004

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 700 RT 130 NORTH
Suite, Apt. #, etc.
22 SUITE 204
City & State
23 CINCINNATI
Zip 24 NJ Country 25 08077
2a. Mailing Address
26 P.O. Box 297
Suite, Apt. #, etc.
27
City & State
28 WASHINGTON, PA
Zip 29 18976 Country 30 USA

3. Date Incorporated or Qualified
09/29/1993
4. FEI Number
65-0500679
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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LAMPERT, MICHAEL A ESQ.
1655 PALM BEACH LAKES BLVD.
SUITE 900
WEST PALM BEACH FL 33401-2225

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
FL

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

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME P
STEVENS, LEONARD
STREET ADDRESS
2015 STONE RIDGE CANE
CITY-ST-ZIP VILLANOVA PA 19085
TITLE
NAME V
LAMPERT, ARNOLD
STREET ADDRESS
1021 COUNTRY CLUB DR.
CITY-ST-ZIP NORTH PALM BEACH FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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

Leonard Stevens

CR2E034 (10/97)