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Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90032 017 ***158.75

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S92083

1. Corporation Name
SAI/DELTA, INC.

Principal Place of Business	Mailing Address
900 HUYLER STREET TETERBORO NJ 07608	900 HUYLER STREET TETERBORO NJ 07608

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 11/05/1991

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

4. FEI Number: 58-1971549 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	Director	☐ Change ☒ Addition
NAME	DEVITO, JOHN		1.2 NAME	Doug Tullio	
STREET ADDRESS	900 HUYLER STREET		1.3 STREET ADDRESS	2722 So Fairview St	
CITY-ST-ZIP	TETERBORO NJ 07608		1.4 CITY-ST-ZIP	Santa Ana, Ca 92704	
TITLE	CD	☒ DELETE	2.1 TITLE	Director & Secretary	☐ Change ☒ Addition
NAME	LOBOZZO, JOSEPH M II		2.2 NAME	Jeff Dunnigan	
STREET ADDRESS	690 PORTLAND AVENUE		2.3 STREET ADDRESS	2722 So Fairview St	
CITY-ST-ZIP	ROCHESTER NY 14621		2.4 CITY-ST-ZIP	Santa Ana, Ca 92704	
TITLE	SD	☒ DELETE	3.1 TITLE	Director	☐ Change ☒ Addition
NAME	JULIAN, MICHAEL		3.2 NAME	John Glade	
STREET ADDRESS	690 PORTLAND AVENUE		3.3 STREET ADDRESS	2722 So Fairview St	
CITY-ST-ZIP	ROCHESTER NY 14621		3.4 CITY-ST-ZIP	Santa Ana, Ca 92704	
TITLE	ASD	☒ DELETE	4.1 TITLE	Vice President	☐ Change ☒ Addition
NAME	MCCUSKER, MICHAEL		4.2 NAME	Ed Drohan	
STREET ADDRESS	690 PORTLAND AVENUE		4.3 STREET ADDRESS	900 Huyler St	
CITY-ST-ZIP	ROCHESTER NY 14621		4.4 CITY-ST-ZIP	Teterboro, NJ 07608	
TITLE	ASD	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ENGELFRIED, ALFRED		5.2 NAME		
STREET ADDRESS	366 WHITE SPRUCE BLVD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	ROCHESTER NY 14623		5.4 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	METRICK, MARY		6.2 NAME		
STREET ADDRESS	900 HUYLER STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	TETERBORO NY 07608		6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3/16/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #