0313	Annual Report Form 120 la Resident
Return to:	Due No Later Than November 30.
SECRETARY OF STATE	1. Mailing Address - Please Correct, if Not Correct  C T CORPORATION SYSTEM
700 WEST JEFFERSON PO BOX 83720	RECOVERY SERVICES INTERNATIO 300 NORTH SIXTH STREET
BOISE, ID 83720-0080	TAX DEPARTMENT TITLE
NO FEE REQUIRED	10 83702
* FIRST NOTICE	Y. O. Box 4/563 3. Organized Under the Laws of
Corporations: Enter Name	"   PMILADELDWIA   O. Anan Jawa
Limited Liability Companie	es: Enter Names and Addresses of D Managers or Members (check one)
Office to 11	Managers or Managers or Members (check one)
A	Street or P.O. Address City See
PRES. / DIR GO	CRALDING F. PRUSKO 1601 ChesTNUT ST. Ph.LA PA 19182
Sec.	
ري. ا	COLGE D. Mulligan - See ABOVE -
1557 Sec. A	
\ . 'W	DECLA S. FEENEY -See ABOVE -
~ ~	OCRT Y. IRVAN See ABOVE-
DIR O	
Cianata (N	MRISTOPHER E. DARNES -See ABOVE -
Signature of New Registe	ered Agent 6.
	Signature angulary. Leavey Date 11/4/98  Name (Typed or ANGELA S. FEENCY Title ASST. See.)  3-1998
	Signature Grant A. Velkey Date 11/4/38
	Name (Typed or HUGELA S. FEENCY Title AST See
ISSUED: 07-03	( DO 110-
	DO NOT TAPE OR STAPLE
4 7 3 4 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	