

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

FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **843752** (7)
1. Corporation Name
PALL CORPORATION



Principal Place of Business 2200 NORTHERN BLVD EAST HILLS NY 11548	Mailing Address 2200 NORTHERN BLVD EAST HILLS NY 11548
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/20/1979	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 11-1541330		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85		86 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRASNOFF, ERIC	12 NAME	
STREET ADDRESS	2200 NORTHERN BLVD	13 STREET ADDRESS	
CITY-ST-ZIP	EAST HILLS NY	14 CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHWARTZMAN, PETER	22 NAME	MARY ANN BARILETT
STREET ADDRESS	2200 NORTHERN BLVD	23 STREET ADDRESS	2200 NORTHERN BLVD
CITY-ST-ZIP	EAST HILLS NY	24 CITY-ST-ZIP	EAST HILLS, N.Y. 11548
TITLE	D <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALL, DAVID B	32 NAME	
STREET ADDRESS	2200 NORTHERN BLVD	33 STREET ADDRESS	
CITY-ST-ZIP	EAST HILLS NY	34 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, DEREK	42 NAME	
STREET ADDRESS	2200 NORTHERN BLVD.	43 STREET ADDRESS	
CITY-ST-ZIP	EAST HILLS NY 11548	44 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYWARD-SURRY, JEREMY	52 NAME	8000002411178
STREET ADDRESS	2200 NORTHERN BLVD	53 STREET ADDRESS	-01/26/98--01012--029
CITY-ST-ZIP	EAST HILLS NY	54 CITY-ST-ZIP	***158.75
TITLE	V <input checked="" type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NICHOLLS, DONALD	62 NAME	JOHN ADAMOVICH
STREET ADDRESS	2200 NORTHERN BLVD	63 STREET ADDRESS	2200 NORTHERN BLVD
CITY-ST-ZIP	EAST HILLS NY 11548	64 CITY-ST-ZIP	EAST HILLS, NY 11548

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 _____ DATE _____

CR2E034 (10/97)