

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S98721** (1)

1. Corporation Name
EDGE INVESTMENT CORP.

Principal Place of Business: **3901 WASHINGTON ROAD SUITE 301 MCMURRAY PA 15317**
Mailing Address: ~~3901 WASHINGTON ROAD SUITE 301 MCMURRAY PA 15317~~

APPROVED AND FILED
95 MAY -1 11 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26	1905 Wellington Edge Blvd.	12/09/1991	08/08/1994
22		27		4. FEI Number	Applied For
City & State		City & State		65-0172686	Not Applicable
23		28	Wellington, FL	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
24	25	29	30	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
		33414	USA		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CRANE, ROBERT L ESQ 515 NORH FLAGLER DRIVE SUITE 1800 WEST PALM BEACH FL 33401				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

11. Pursuant to the provisions of Sections 607 (0502) and 607 (0504), 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: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP RYAN, EDWARD M. 1082 BOWER HILL ROAD PITTSBURG PA	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME	577 Ryan
STREET ADDRESS		13 STREET ADDRESS	
CITY, ST, ZIP		14 CITY, ST, ZIP	
TITLE	DST BOVE, TERRY F. 3901 WASHINGTON ROAD, SUITE 301 MCMURRAY PA	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	Terry F. Bove
STREET ADDRESS		23 STREET ADDRESS	
CITY, ST, ZIP		24 CITY, ST, ZIP	
TITLE	DV KALLAND, DENISE 1750 N. FLORIDA MANGO WEST PALM BEACH FL	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE	AS TERR; LARRY 1288 NW AVENUE E BELLE GLADE FL	41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	AS
STREET ADDRESS		43 STREET ADDRESS	Michael Kalland
CITY, ST, ZIP		44 CITY, ST, ZIP	814 S.W. 7th Terrace Florida City, FL 33034
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 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 113 (0730)(k), 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 and certified that I am an officer or director of the corporation 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: **Terry F. Bove** DATE: **4/12/95**