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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS FILED

Jan 20 1998 8:00am

Secretary of State

DOCUMENT #

821389

10 WOODBRIDGE CENTER DR.

WOODBRIDGE NJ

STREET ADDRESS

CITY-ST-ZIP

FIRST INVESTORS CORPORATION Principal Place of Business Mailing Address 581 MAIN STREET 95 WALL STREET WOODBRIDGE NJ 07095 NEW YORK NY 10005 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/30/1968 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 13-2608328 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Zip Country Zio 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name UNITED STATES CORPORATION COMPANY 1201 HAYES ST. 82 Street Address (P.O. Box Number is Not Acceptable) STE. 105 83 TALLAHASSEE FL 32301 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 agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, typed or pointed minic of repisterest agent and title if applicable DATE (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition ☐ Change DELFTE 1.1 TITLE TITLE HEAD, GLENN O 1.2 NAME NAME 95 WALL STREET 1.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE PD 2.1 TITLE THILE HECKER, MARVIN 2.2 NAME NAME 95 WALL STREET 2.3 \$1REE1 ADDRESS STREET ADDRESS **NEW YORK NY** 2. 4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE SVP 3.1 TITLE TITLE RINALDI, LOUIS 3.2 NAME NAME 10 WOODBRIDGE CENTER DR. 3.3 STREET ADDRESS STREET ADDRESS WOODBRIDGE NJ 3 4. CHY - ST - ZIP CI1Y-S1-ZIP Change Addition DELETE 4.1 TITLE TITLE FAUCI, LAWRENCE 4. 2 NAME NAME 95 WALL STREET 4.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 4.4 CHY-ST-76 CITY-ST-ZIP Change Addition DELETE SGC 5.1 HILLE TITLE LAVOIE, LARRY R 5.2 NAME NAME 95 WALL STREET 5.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 5.4 CHTY-ST-ZIP CITY - ST- ZIP Addition DELETE ☐ Change 6.1 THLE TITLE BENEDEK, JOSEPH I 6.2 NAME NAME

14. Thereby 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 eath; 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 Pleist 13 of Pleist 13 if Person I are the product of the corporation of the corpor Block 12 or Block 13 if changed, or on an attachment with an Aldress.

6.3 STREET ADDRESS

6.4 CHY-S1-ZIP