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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

96 MAR 28 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000000635 (2)

1. Corporation Name

~~WATERFORD WEDGEWOOD USA, INC.~~
WATERFORD WEDGEWOOD USA, INC.

Principal Place of Business

1330 CAMPUS PARKWAY
NEPTUNE NJ 07753

Mailing Address

1330 CAMPUS PARKWAY
NEPTUNE NJ 07753



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and, if not applicable,

(NOTE: Registered Agent Signature is required when changing agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME ASHWELL, KNEALE
STREET ADDRESS BARLASTON STOKE-ON-TRENT
CITY- ST- ZIP ENGLAND ST1293S

TITLE D ☐ DELETE
NAME STONER, GEORGE
STREET ADDRESS BARLASTON STOKE-ON-TRENT
CITY- ST- ZIP ENGLAND ST1293S

TITLE P ☐ DELETE
NAME MCGILLIVARY, CHRISTOPHER J
STREET ADDRESS 1330 CAMPUS PARKWAY
CITY- ST- ZIP NEPTUNE NJ

TITLE S ☐ DELETE
NAME CAPPIELLO, ANTHONY P
STREET ADDRESS 1330 CAMPUS PARKWAY
CITY- ST- ZIP NEPTUNE NJ

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE P/D
3.2 NAME McGillivary, Christopher
3.3 STREET ADDRESS 1330 Campus Parkway
3.4 CITY- ST- ZIP Neptune, NJ 07753

4.1 TITLE T/S/VP/D
4.2 NAME Capiello, Anthony P.
4.3 STREET ADDRESS 1330 Campus Parkway
4.4 CITY- ST- ZIP Neptune, NJ 07753

5.1 TITLE D/C
5.2 NAME Brian Patterson
5.3 STREET ADDRESS Barlaston Stoke-on-Trent
5.4 CITY- ST- ZIP England ST129ES

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 119.07(3)(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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony P. Capiello

2/2/96

Date

(908)938-5800

Daytime Phone #

CR2E034 (12/95)