

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K71778** (0)

1. Corporation Name

AUTOMATED ENTRANCE SYSTEMS OF FLORIDA, INC.



Principal Place of Business

**4500 OAK CIRCLE
BUILDING B SUITE 3
BOCA RATON FL 33431
US**

Mailing Address

**81 TWIN RIVERS DR.
P.O. BOX 6003
HIGHTSTOWN NJ 08520
US**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

3. Date Incorporated or Qualified

03/06/1989

3a. Date of Last Report

04/06/1995

4. FEI Number

65-0129120

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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 607.0607 and 607.1504, 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 607.0606, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent in Charge

Signature of Agent in Charge or Secretary

Date

12. OFFICERS AND DIRECTORS

12.

NAME

STREET ADDRESS

CITY, ST, ZIP

12.

NAME

STREET ADDRESS

CITY, ST, ZIP

12.

NAME

STREET ADDRESS

CITY, ST, ZIP

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CITY, ST, ZIP

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NAME

STREET ADDRESS

CITY, ST, ZIP

12.

NAME

STREET ADDRESS

CITY, ST, ZIP

12.

NAME

**P
LORIA, JOSEPH V.
171 TWIN RIVERS DR.
EAST WINDSOR NJ
V**

☐ DELETE

**FISHER, MICHAEL J.
171 TWIN RIVERS DR.
EAST WINDSOR NJ
V**

☒ DELETE

**BRUNO, ANTHONY J.
171 TWIN RIVERS DR.
EAST WINDSOR NJ
D**

☐ DELETE

**FARNSTROM, BENGT
ROUTE 2, BOX 124
WARRENTON VA
D**

☐ DELETE

**SAMUELSSON, BERTIL
BOX 131 S-261 22
LANDSKRONA, SWEDEN**

☐ DELETE

☐ DELETE

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY, ST, ZIP

37. TITLE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

PRINT NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/96

609-443-5800

CR2E034 (12/95)

ATTACHMENT TO STATE OF FLORIDA
ANNUAL REPORT

OFFICERS OF AUTOMATED ENTRANCE SYSTEMS OF FLORIDA, INC.

<u>Title</u>	<u>Name</u>	<u>Address</u>
President	Joseph V. Loria	81 Twin Rivers Drive HiEast Windsor, N.J. 08520
Vice President Finance	Anthony J. Bruno	81 Twin Rivers Drive Hightstown, N.J. 08520
Secretary	Ilene Jaspan	81 Twin Rivers Drive Hightstown, NJ 08520

DIRECTORS OF AUTOMATED ENTRANCE SYSTEMS OF FLORIDA, INC.

Bertil Samuelsson	Box 131 S-261 22 Landskrona Sweden
Anders Unger	Box 131 S-261 22 Landskrona Sweden
Bengt Farnstrom	Route #2 Box 124 Warrenton, VA 22186
Lennart Jonsson	Box 131 S-261 22 Landskrona Sweden
Joseph V. Loria	81 Twin Rivers Drive Hightstown, N.J. 08520