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95 MAY -1 AM 5:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # P04096 (4)
1. Corporation Name:
PAULUS, SOKOLOWSKI & SARTOR, INC.

Principal Place of Business: **67-A MOUNTAIN BOULEVARD EXT. WARREN NJ 07059-0039 US**
Mailing Address: **67-A MOUNTAIN BOULEVARD EXT. WARREN NJ 07059-0039 US**

3. Date incorporated or qualified: **11/20/1984** 3a. Date of Last Report: **06/01/1994**
4. FEI Number: **22-1838372** 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. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **MEHLTRETTER, JAMES
245 BAYSHORE BLVD.
TAMPA FL 33606**

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 607.0502 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 607.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 TITLE	12.2 NAME	13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.3 STREET ADDRESS	PD PAULUS, WILLIAM, JR. 4 OWENS DRIVE WARREN NJ	13.2 NAME	
12.4 CITY, ST, ZIP		13.3 STREET ADDRESS	
12.5 TITLE	VD FALCONE, P. A. 764 SCOTCH PLAINS AVENUE WESTFIELD NJ	13.4 CITY, ST, ZIP	
12.6 NAME		13.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.7 STREET ADDRESS	VD BRADSKY, O. VON 618 LAFAYETTE AVENUE WESTWOOD NJ	13.6 NAME	
12.8 CITY, ST, ZIP		13.7 STREET ADDRESS	
12.9 TITLE	VD ANTES, D. 431 CAMBRIDGE ROAD RIDGEWOOD NJ	13.8 CITY, ST, ZIP	
12.10 NAME		13.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.11 STREET ADDRESS	STD SARTOR, ANTHONY J. 19 KEVIN ROAD SCOTCH PLAINS NJ	13.10 NAME	
12.12 CITY, ST, ZIP		13.11 STREET ADDRESS	
12.13 TITLE	V MEHLTRETTER, JAMES 1044 SYLVIA LN. TAMPA FL	13.12 CITY, ST, ZIP	
12.14 NAME		13.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.15 STREET ADDRESS		13.14 NAME	
12.16 CITY, ST, ZIP		13.15 STREET ADDRESS	
		13.16 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.02(1)(b), 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 registered agent empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of change of, or as an attachment with, address.

SIGNATURE: *William Paulus, Jr.* **WILLIAM PAULUS, JR. PRES.** 4/24/95 (111) 560-9700
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR