


**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Jan 29 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P41056 (3)**  
 1. Corporation Name  
**THE MORGANTI GROUP, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business 100 MILL PLAIN ROAD 4TH FLOOR DANBURY CT 06811 US	Mailing Address 100 MILL PLAIN ROAD 4TH FLOOR DANBURY CT 06811 US
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3. Date Incorporated or Qualified  
**10/19/1992**

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29 30

4. FEI Number  
**06-1149260**

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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	ESBJOURNISON, DONALD L.	
STREET ADDRESS	100 MILL PLAIN ROAD	
CITY-ST-ZIP	DANBURY CT	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	SIHWEL, ISA S.	
STREET ADDRESS	100 MILL PLAIN RD	
CITY-ST-ZIP	DANBURY CT	
TITLE	C	<input checked="" type="checkbox"/> DELETE
NAME	TOROYAN, KEVORK	
STREET ADDRESS	100 MILL PLAIN RD	
CITY-ST-ZIP	DANBURY CT	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SHAWWA, NABIL	
STREET ADDRESS	100 MILL PLAIN RD	
CITY-ST-ZIP	DANBURY CT	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	REYNOLDS, FRANK	
STREET ADDRESS	100 MILL PLAIN RD	
CITY-ST-ZIP	DANBURY CT	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BIZRI, RAFIC	
STREET ADDRESS	100 MILL PLAIN ROAD	
CITY-ST-ZIP	DANBURY CT	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Izzat Kayyali	
1.3 STREET ADDRESS	100 Mill Plain Road	
1.4 CITY-ST-ZIP	Danbury, CT 06811	
2.1 TITLE	Executive VP, Operations	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Leon Der-Ohannessian	
2.3 STREET ADDRESS	100 Mill Plain Road	
2.4 CITY-ST-ZIP	Danbury, CT 06811	
3.1 TITLE	Executive VP, Commercial & Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Nabil M. Takla	
3.3 STREET ADDRESS	100 Mill Plain Road	
3.4 CITY-ST-ZIP		
4.1 TITLE	VP Finance & Administration	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Vartan Vartanian	
4.3 STREET ADDRESS	100 Mill Plain Road	
4.4 CITY-ST-ZIP	Danbury, CT 06811	
5.1 TITLE	Sr. Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Theodore Catino	
5.3 STREET ADDRESS	100 Mill Plain Rd.	
5.4 CITY-ST-ZIP	Danbury, CT 06811	
6.1 TITLE	Sr. Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Vince Simoie	
6.3 STREET ADDRESS	100 Mill Plain Road	
6.4 CITY-ST-ZIP	Danbury, CT 06811	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 as an attachment with an address.

SIGNATURE: *Nabil M. Takla* N. M. Takla, Exec. VP & Secty. 1/14/98 203 743 2675

CR2E084 (10/97)