

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # F93000001212 (0)

95 JAN 31 AM 10:01

1. Corporation Name
HOLTEC INTERNATIONAL, A NEW JERSEY CORPORATION

Principal Place of Business Mailing Address
2060 FAIRFAX AVE. 2060 FAIRFAX AVE.
CHERRY HILL NJ 08003 CHERRY HILL NJ 08003

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
02/26/1993 **04/27/1994**

4. FEI Number Applied For
22-2759643 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

2. Principal Place of Business 2a. Mailing Address

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24 25 29 30

9. Name and Address of Current Registered Agent

**SINGH, KRISHNA P DR.
230 NORMANDY CIRCLE F
PALM HARBOR FL 34683**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 title if applicable (NOTE: Registered Agent Signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS	
TITLE	CDP
NAME	SINGH, KRISHNA P DR.
STREET ADDRESS	230 NORMANDY CIRCLE, E
CITY-ST-ZIP	PALM HARBOR FL 34683
TITLE	VCD
NAME	SOLER, ALAN I DR.
STREET ADDRESS	1282 CHARLESTON RD.
CITY-ST-ZIP	CHERRY HILL NJ 08034
TITLE	VP
NAME	SOLER, ALAN I DR.
STREET ADDRESS	1282 CHARLESTON RD.
CITY-ST-ZIP	CHERRY HILL NJ 08034
TITLE	SDT
NAME	SINGH, MARTHA J MS.
STREET ADDRESS	230 NORMANDY CIRCLE
CITY-ST-ZIP	PALM HARBOR FL 34683
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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: *Martha J. Singh* 1/24/95
MARTHA J. SINGH